

# **Program Year 2008-2012 Consolidated Plan Strategic Plan**

## **Introduction**

The Strategic Plan introduces an analysis of current conditions within each community development topic. It then gives an analysis of specific needs within Harris County as they relate to each topic. The needs analysis is then followed by Harris County Community Services Department (CSD) goal and measurable objectives which will be used as a guide for accomplishments over the next five planning years. The Strategic Plan is organized according to the following community development topics:

- Housing
- Homelessness
- Non-Housing Community Development
  - Public Facilities
  - Public Services
  - Infrastructure
  - Economic Development, Education and Workforce Development
- Other Non-Housing Community Development
- Anti-Poverty Strategy
- Intergovernmental Coordination and Partnerships
- Monitoring Plan

## **Basis for Assigning Priorities**

CSD funding priorities are determined by analyses of need in the county. Priorities are largely determined by the severity of unmet needs. For instance, affordable housing priorities that were considered a high need level, were based upon the large number of extremely low-income (less than 30% MFI) households, and combined with the considerable housing affordability deficit for those families.

Funds made available to CSD will be used to address the needs shown in the Continuum of Care Homelessness Gaps Analysis, Housing Needs, Non-Homeless, and Community Needs tables. Each identified area of need is prioritized relative to other needs within each category. Priorities for community needs were assigned according to research, survey results from local governments and citizen participation. A high priority indicates that CSD will expend HUD entitlement funds on that particular activity. A medium priority indicates that additional funds will be expended if available, and HUD entitlement funds may be spent.

## **Obstacles to Meeting Underserved Needs**

In the attempt to meet the needs of Harris County's low-income population, many obstacles exist. Socio-economic issues such as:

- physical or mental health problems,
- lack of affordable child care,
- poor credit history,
- low educational attainment,
- lack of or under-employment, and
- lack of transportation to service locations or employment centers

These socio-economic issues may regularly put opportunities out of reach for disadvantaged persons. Many times, if an individual or family has more than one of these problems, these barriers can compound on each other, causing a seemingly impossible situation in which quality of life improvements are unlikely.

Lack of public awareness of available programs is a major obstacle to community development efforts. In an effort to increase public awareness, CSD makes information on community development services available to persons at community outreach meetings, Request for Proposals (RFP) meetings, and professional consultation workshops. In addition, all public notices, press releases, and invitation letters are complete with CSD contact information. Information on all community development opportunities is also given to all persons who enter the Harris County system through Harris County Housing Authority and Social Services Department. Public awareness is also addressed at the subrecipient level by individual CSD affiliated service providers.

Another major obstacle of many non-profit service providers is capacity building, or the ability to bring the organization to the point of being fully staffed and functional. This may be very difficult for organizations that begin with little or no resources, other than CSD funding. For this reason, organizations that wish to conduct programs or projects with HOME funds are required by HUD to have matching funds of greater than or equal to 25 percent of the amount granted by CSD. Similarly, organizations that are granted ESG funds must have matching funds of greater than or equal to 100% of the amount granted by CSD. In addition, CSD closely scrutinizes and tracks the subrecipient's stated match and leveraging sources and proposed budget. CSD also requires that its subrecipients have at least six months of operating capital available for the project undertaken with HUD funds.

Through our Three Track Program, CSD offers year-round technical assistance in community planning, strategic planning for non-profits, program development and management to assist non-profits obtain non-profit status, board development and non-profit management.

Personal issues of the disadvantaged often become obstacles to community development efforts, in addition to the logistical difficulties of service providers. After years of

poverty and low quality of life, disadvantaged persons may tend to become apathetic and believe that their living or working situation will never change. These feelings may cause a lack of motivation and willingness to seek out a better life, resulting in a major obstacle to serving the financially disadvantaged. When combined with substance abuse or a physical or mental disability, feelings of helplessness and lack of motivation may make the journey to self-sufficiency or the transition to permanent housing seem impossible.

### **Compliance with Federal, State and Local Regulations**

Projects using Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), or HOME Investment Partnership (HOME) funds will conform to HUD regulations and where applicable state and local codes. Harris County Community & Economic Development Department and/or its subrecipients will maintain policies and procedures, operating guides/manuals, standards, and records as required by HUD. These documents include but are not limited to: Site and Neighborhood Standards, policies and procedures for affordability and recapture, citizenship policy, Multi-unit Housing Concentration Policy, property and building standards, direct homeownership and rehabilitation assistance operating manuals, eligibility guides, and grievance procedures (see Section 2 page 6).

## Housing

Currently, interest rates have been the lowest in 30 years. This has sparked a buying frenzy; however, while the housing market is strong in Harris County, current statistics show that the developers are responding to the demands of higher income households and thus are producing a housing product that does not meet the needs of all Harris County households. Low-income households—those households earning less than 80 percent of the median family income—are faced with a housing market that is not meeting their specific housing needs.

The most pressing housing need of low-income households is the availability of affordable housing. According to the Houston Association of Realtors MLS report, as of December 2007, “the median price of single-family homes soared to \$159,000. If the price of a typical monthly home mortgage payment is one percent of the total cost of the home, the median price of a family’s monthly mortgage payment would be \$1,590. This is far above what is considered affordable for low-income families (an affordable monthly housing cost is considered to be no more than 30 percent of a family’s total monthly income, see Housing Market Analysis). Other housing needs of low- and moderate-income households include housing with adequate space for large households and structurally sound and hazard free housing for all households.

### Overview

- The most pressing housing need of low-income households is the availability of affordable housing.
- In 2000, there were 157,039 overcrowded housing units in Harris County, 13 percent of the total housing stock, a 5 percent increase from 1990.
- According to the analysis of the condition of housing in the CSD service area, approximately 122,257 single-family housing units are in need of replacement or major rehabilitation.

## Household Types in Need

### Extremely low-income households

According to HUD, extremely low-income households are those whose income is between 0 and 30 percent of the Area Median income (AMI). Depending on the size of the family, construction costs, and/or fair market rents, HUD may establish income ceilings higher or lower than 30 percent of the AMI. In Harris County, extremely low-income households number 35,572.

### Low-income households

According to HUD, low-income households are those whose income does not exceed 50 percent of the AMI. Depending on the size of the family, construction costs, and/or fair market rents, HUD may establish income ceilings higher or lower than 50 percent of the AMI. In Harris County, low-income households number 35,636.

#### Moderate-income families

According to HUD, moderate-income households are those whose income does not exceed 80 percent of the AMI. Depending on the size of the family, construction costs, and/or fair market rents, HUD may establish income ceilings higher or lower than 80 percent of the AMI. In Harris County, moderate-income households number 65,554.

#### Middle-income families

According to HUD, middle-income households are those whose income is between 80 percent and 95 percent of the AMI. Depending on the size of the family, construction costs, and/or fair market rents, HUD may establish income ceilings higher or lower than 95 percent of the AMI.

### Renters/Owners

Of all low-income households, renter households make up 42 percent (554,905 households) and owners comprise 58 percent. Based on these totals, both renters and owners are in need of some form of housing assistance, such as rental assistance, housing rehabilitation, and construction of affordable units. Renter and owner households in need of housing were determined based upon the estimated housing cost deficits and rehabilitation needs of those households. Households with housing needs are identified by high (“H”), medium (“M”) and low (“L”) need level in Table 5.1, Priority Housing Needs /Investment Plan Table.

Table 5.1 Priority Housing Needs/Investment Plan Table (Table 2A)

PRIORITY HOUSING NEEDS (households)		Priority		Unmet Need
<b>Renter</b>	Small Related	0-30%	H	32,360
		31-50%	M	24,910
		51-80%	L	10,235
	Large Related	0-30%	H	12,025
		31-50%	H	6,370
		51-80%	M	1,357
	Elderly	0-30%	M	10,474
		31-50%	M	5,414
		51-80%	L	3,112
	All Other	0-30%	H	22,955
		31-50%	M	20,000
		51-80%	H	12,760
<b>Owner</b>	Small Related	0-30%	H	10,485
		31-50%	H	10,705
		51-80%	M	14,690
	Large Related	0-30%	H	5,085
		31-50%	H	5,805
		51-80%	M	5,140
	Elderly	0-30%	M	12,324
		31-50%	M	7,299
		51-80%	L	5,114
	All Other	0-30%	H	5,325
		31-50%	H	3,320
		51-80%	M	4,914
<b>Non-Homeless Special Needs</b>	Elderly	0-80%	H	7,016
	Frail Elderly	0-80%		
	Severe Mental Illness	0-80%		
	Physical Disability	0-80%	H	14,400
	Developmental Disability	0-80%		
	Alcohol/Drug Abuse	0-80%		
	HIV/AIDS	0-80%	H	1,500
	Rapid Re-Housing	0-80%		21,280
	Victims of Domestic	0-80%		

\*Number of units was determined using the 2000 Consolidated Housing Affordability Strategy (CHAS)

### Large Households

Large, related renter households of five or more persons, account for 13 percent of all low-income households. Based upon estimated housing cost deficits, large households earning less than 50 percent of the MFI are identified as having a high housing cost burden. In particular, large households earning less than 30 percent of the MFI are faced with cost deficits as much as \$454 in meeting the fair housing market rent of housing units with three or more bedrooms. There are an estimated 4,756 large, low-income households who are in need of some form of housing assistance. Large households are threatened with housing cost burdens due to the cost of existing housing and the lack of large, affordable rental housing units. According to O'Connor & Associates, the average monthly rent for three-bedroom units in the Greater Houston housing market area was \$1,024 in 2007. For very-low (0-30 percent MFI) and low- (31-50 percent MFI) income families of five or more persons a rent at this cost creates a housing deficit and poses a severe cost burden.

### Small Related Households

Small, related households of two to four persons are also in need of some form of housing assistance. This household type accounts for 52 percent of all low- and moderate-income households. Small related households earning less than 30 percent of the MFI face housing affordability deficits. There are 7,084 small related households with housing needs.

### Single Households

All other households, primarily single persons living alone, account for 36 percent of all households. Other households earning less than 50 percent of the MFI face are in need of some form of housing assistance. There are 10,721 households of this type with housing needs.

### Elderly Households

Elderly households are estimated to account for almost 12.9 percent of the all households in the Harris County service area by 2006. Numerically, this accounts for 297,327 elderly households. Of low-income households, elderly households represent 29,511, or 13.3 percent. Elderly renter households earning less than 30 percent of the MFI and nearly all elderly owner households will be in need of housing assistance over the next five years. There are approximately 30,149 households of this type with housing needs.

### Public Housing Residents

There are approximately 30 subsidized multi-family, renter occupied low-income housing units available in Houston/Harris County supported through federal and state programs. These units are supported by HUD's Section 8 Project Based Housing and the Texas Department of Housing and Community Affairs Low Income Housing Tax Credits Program. In addition, to these units, the Harris County Housing Authority assists more than 12,000 individuals and families with housing vouchers for housing units, located throughout Harris County. However, we are still experiencing a major shortage of subsidized housing especially for a county of this size.

### Public Housing and Section 8 Waiting List

According to the Harris County Housing Authority (HCHA) Public Housing Agency (PHA) 5 Year Plan, there are 21, 284 applicants on the HCHA Housing Choice Voucher (HCV) waiting list. The waiting list has been closed since October 31, 2008, and does not plan on reopening in the PHA Plan year. The HCHA HCV does not permit specific categories of families onto the waiting list, even if generally closed.

### Persons with Disabilities

According to the 2006 American Community Survey (ACS) profile for Harris County, there were 424,659 persons age 5 and over with disabilities living in the Houston MSA. As of 2006, the percentage of disabled persons who earned incomes below the poverty level was over twice that of the percentage of the total population of Harris County with similar income levels. The median monthly earnings of men and women between 21 and 64 years of age with a severe disability, respectively is \$1,262 and \$1,000.

### Persons with HIV/AIDS

According to the Centers for Disease Control, Texas ranks as one of ten leading with the highest number of cumulative AIDS cases as of June 2007, with 24,398 reported cases. According to the AIDS Foundation Houston, one in ninety Houstonians is HIV positive. AIDS has dropped to the second leading cause of death in Texas for men 25 to 44 years of age and has remained the third leading cause of death for Texas women 25 to 34 years of age according to the Texas Department of Health Bureau of HIV/STD. Persons with HIV/AIDS generally have a more difficult time retaining employment due to discrimination and/or illness and risks of exposure to illness. These factors, combined with the high costs of health care, result in a greater likelihood for persons with HIV/AIDS to have low incomes and a greater need for affordable housing.

### Homeless

According to the 2010 Coalition for the Homeless Houston/Harris County Point-In-Time Enumeration Study, on the night of January 22, 2010 there were 6,819 sheltered and unsheltered homeless individuals (4,716 sheltered and 2,103 unsheltered). This number is a 4 percent increase from the point-in-time study of 2009. In creating a more complete view of homelessness in Harris County, the study also takes into account homeless individuals in Harris County jails and those who would be homeless were it not for the assistance of vouchers for permanent supportive housing or rapid re-housing. These additional point-in-time figures increase the number of Harris County homeless individuals from 6,819 to 9,692. As well as having no income or extremely low incomes, homeless individuals generally have a more difficult time accessing supportive services with respect to medical, psychological/emotional, educational, and employment assistance. Based on the HMIS database for period November, 1 2010 to October 31, 2011, 19,840 persons experienced homelessness; 10,020 persons lost their housing and became homeless; 2,461 persons exited homelessness; and 95 days is the number of days persons experienced homelessness (aggregate program enrollment stays of clients exiting programs). According to a preliminary 2011 study by the Coalition for the Homeless (of 8,026 homeless individuals), 10 percent are experiencing short-term, one-time homelessness, in need of help to regain financial self-sufficiency; 55 percent will need



long-term affordable housing and some ongoing support services; and 35 percent will need long-term affordable housing and intense support services.

Harris County CSD will be seeking projects that provide a variety of independent and assisted-living housing environments. CSD has placed a priority on projects that serve the elderly. Housing construction projects will have the ability to convert housing plans for those in need of enhanced accessibility (i.e. wheel chair ramp or lower countertops). Rehabilitation projects will be available to add accessibility elements to existing housing stock.

## **Housing Problems and Needs**

### Cost Burden/Extreme Cost Burden

While median family income (MFI) has increased in proportion to single family housing cost, a substantial affordability gap still exists. Affordability deficits are as much as \$788 for families making less than 50 percent of the MFI. There are an estimated 24,022 renter households with housing cost deficits or extreme housing cost burdens paying 30 percent or more of their income for rent or mortgage payments.

### Overcrowding

Overcrowding is often a problem for large households (five or more persons), when the housing market fails to provide an adequate supply of housing units with three or more bedrooms. Analysis of Harris County housing development trends, particularly multi-family development, shows that the market is pumping out an abundant supply of one- and two bedroom housing units in response to estimated and projected increase of smaller households. However, the market's response to meet the needs of smaller households has created a void in meeting the needs of large households, thus enhancing the issue of overcrowding.

HUD defines overcrowding as the condition where there are more than 1.01 persons per room. In 2000, there were 157,039 overcrowded housing units in Harris County, 15.3 percent of the total housing stock, a 7 percent increase from 1990. Analysis of bedroom size indicates that the majority of multi-family housing meets the needs of smaller not larger households. Less than six percent of the multi-family housing stock has three or more bedrooms, while one and two bedroom units comprise 91 percent of the total multi-family housing stock.

### Substandard Housing

For low-income homeowners, housing needs are amplified when home maintenance problems or other housing-related expenses arise (i.e., septic tank leakage, high utility expenses, roof repairs, etc.). According to the analysis of the condition of housing in the CSD service area, approximately 13,178 single-family housing units are in need of replacement or major rehabilitation. Additionally, 33.2 percent of these units are located in low-income target areas.

### Lead-Based Paint

In 2004, the City and County health departments tested 46,445 children, and identified 699, or 1.5 percent of children with elevated blood lead levels. The majority of confirmed cases were children living in pre-19650 housing. Lead-based paint was banned in 1978. However, Houston/Harris County still has almost 700,000 pre-1978 occupied residences, based on data from the 2000 census. In 2000, 6.5 percent of children under age 6 in Houston/Harris County were tested for blood lead levels. This percentage increased to 10.8 percent in 2004. Of those children who are tested, the percent who tested positive for elevated blood lead levels has decreased over time. The decreasing incidence of children with elevated blood levels can be attributed in part to the HUD programs administered through local public health organizations to remediate houses with dangerous paint.

The prevalence of lead poisoning correlates along socioeconomic divisions. Those near or below the poverty line are more likely to live in older housing containing lead-based paint than are families in the middle or upper middle class. Also, children in lower socioeconomic levels are less likely to receive prompt and adequate medical care elevated blood lead levels.

### Determining Need

Analysis of the characteristics of the housing market including the previously mentioned housing problems is the key to determining the types of housing needs in the Harris County service area. The most pressing housing need of low-income households is the availability of affordable housing. Other housing needs include housing with adequate space for large households and structurally sound and hazard free housing for all households. Meeting these needs comes through several forms of assistance. Forms of housing assistance include providing opportunities for homeownership; constructing new affordable housing units; both multi-family and single family; rehabilitating affordable housing units; abating lead based paint hazards; and providing rent and utility assistance. Table 5.2 Housing Problems and Needed Forms of Assistance illustrates which forms of assistance addresses a particular housing problem. CSD follows the regulation in Title 42, chapter 8, Sec. 1436a. - Restriction on Use of Assisted Housing by Non-resident Aliens when determining need. This regulation prohibits the making of financial assistance available for the benefit of any alien unless that alien is a resident of the United States and is:

- an alien lawfully admitted for permanent residence as an immigrant as defined by section 1101(a)(15) and (20) of title 8
- an alien who entered the United States prior to June 30, 1948, or such subsequent date as is enacted by law, has continuously maintained his or her residence in the United States since then, and is not ineligible for citizenship, but who is deemed to be lawfully admitted for permanent residence as a result of an exercise of discretion by the Attorney General pursuant to section 1259 of title 8
- an alien who is lawfully present in the United States pursuant to an admission under section 1157 of title 8 or pursuant to the granting of asylum (which has not been terminated) under section 1158 of title 8;

- an alien who is lawfully present in the United States as a result of an exercise of discretion by the Attorney General for emergent reasons or reasons deemed strictly in the public interest pursuant to section 1182(d)(5) of title 8;
- an alien who is lawfully present in the United States as a result of the Attorney General's withholding deportation pursuant to section 1231(b)(3) of title 8; or
- an alien lawfully admitted for temporary or permanent residence under section 1255a of title 8.

Table 5.2 Housing Problems and Needed Forms of Assistance

Housing Problem	Forms of Assistance					
	Homeowner-ship	New Construction	Major Rehab	Minor Rehab	Lead-based Paint Abatement	Rental Asst.
Cost Burden	√	√	√	√		√
Substandard Housing		√	√	√		√
Overcrowding	√	√				√
Lead Based Paint Hazard					√	

#### Disproportionate Greater Need

Analysis of 2000 Census figures regarding households according to type and ethnicity shows that while elderly households are considered to be in disproportionately greater need, this is not the case for minority households. Approximately 37 percent of all elderly households earned less than 30 percent of the area median family income, compared to only 26 percent of all households. For the purposes of the Consolidated Plan, HUD has determined that differences of 10 or more percentage points represent a greater disproportionate need among household types or ethnic groups. Figures show that there is a disproportionate need among the elderly has increased. In 2002, approximately 23.9 percent of all elderly households are projected to earn less than 30 percent of the area median family income, compared to only 8.5 percent of all households.

Minority households may be considered to have disproportionately greater need due to the low percentage of minority households earning more than 95 percent of the median family income. Although disproportionately greater need is not evident in any single income group, the percentage of minorities -- particularly Blacks and Hispanics -- are significantly higher among extremely low-income, very low-income, low-income households. Of minority households, 23.6 percent earn less than 50 percent of the area median family income and 42.6 percent earn less than 80 percent. Only 13.9 percent of all households earn less than 50 percent of the area median family income and 27.4 percent earn less than 80 percent.

## **Barriers to Affordable Housing**

When compared to similar counties, housing in Harris County is relatively affordable. However, for a number of reasons, many low-income persons still cannot find quality, affordable housing to meet their needs. For the most part, this is the result of market-driven economics in the Harris County area and national housing trends. For a number of years, builders have utilized existing subdivided, improved land left vacant as a result of the economic bust of the 1980s. As a result, developers have been able to provide new homes at a lower rate, with some homes affordable for middle-income and even moderate-income households. But as Harris County continues to grow, such land is becoming scarce. At the same time, 30-year mortgage rates appear to be the lowest in several decades.

In addition to the rising cost of land in Harris County, many low-income potential homebuyers lack the downpayment to buy a house, thus presenting another barrier to obtaining affordable housing. In fact, the lack of downpayment funds has been cited as a major barrier for first-time homebuyers. The majority of homes that are affordable for very low- and low-income households are substandard or inappropriate for that particular household. The percentage of units with potential lead-based-paint contamination is extremely high in Harris County target areas. In 2000, approximately 30 percent of the homes in Harris County were classified as substandard; three percent were dilapidated. An additional 7.1 percent of homes were vacant.

For some households, an affordable housing unit may not be an appropriate unit. Most housing, regardless of affordability, is not appropriate for disabled persons. Depending upon the disabilities involved, rehabilitation of a home into a barrier-free environment can be relatively expensive. Even newly constructed housing often fails to address the needs of disabled persons. Many elderly persons, particularly the frail elderly, are faced with a similar dilemma. Large families are often forced into an overcrowded environment because smaller units are more affordable and much more readily available.

If public policy plays a role in creating barriers to the development of affordable housing, its role is relatively small. State policy impacts affordable housing only in its regulation of water districts. The state allows three types of water districts: fresh water supply districts (FWSD), water control and improvement districts (WCID), and municipal utility districts (MUD). These districts provide financing for water and sewer improvements through bonds. Most of the water and sewer services for residential subdivisions in unincorporated Harris County are provided by water districts. Payment of fees assessed by the local FWSD, WCID or MUDs can significantly impact the housing cost burden very low- and low-income families.

Harris County, like all Texas counties, has no regulatory powers over area land use. As a result, there are no zoning ordinances to control and plan housing development. Only minimal building codes are in effect in the unincorporated area of the county. In the absence of county land-use policies, most subdivisions have developed complex systems of deed restrictions, ranging from allowable land uses to required upkeep. While a home

in a subdivision may initially be affordable, a homeowner's ability to maintain a home according to the specifications of the homeowners association and local deed restrictions may keep extremely low-, very-low, low-income families from finding affordable housing. Many subdivisions with homes that are affordable and available to extremely low-, very low-income households have permitted local deed restrictions to lapse or become invalid, often as a result of the inability to meet the legal fees necessary to enforce the private restrictions.

Each of the 34 incorporated cities, towns and villages have the legal authority to regulate land use within their boundaries. However, the extent to which land-use regulations are maintained and enforced varies considerably among those communities. Regulations requiring large residential lots, minimum building footprint, minimum landscaping footprint, extensive setbacks or other aesthetic requirements may increase housing costs beyond a range that is affordable to extremely low-, very low-, and low-income households.

Public policy issues impacting housing cost-burden include fees assessed by water and sewer service districts serving subdivisions in the unincorporated area. Additionally, each of the cooperative cities in the service area has various land-use regulations, which may impact the cost and/or availability of area housing. Finally, private sector deed restrictions utilized by a number of subdivisions may place an undue burden on very low-low-income households. Strategies to be utilized by Harris County in overcoming the barriers identified above include the following:

**Strategy One.** To promote and support affordable housing opportunities throughout the Harris County service area, including downpayment assistance programs, new construction, minor home repair, and rehabilitation of affordable housing units for the purpose of increasing the availability of housing to the very-low, low-income persons.

**Strategy Two.** Promote the Housing Resource Center which is an information clearinghouse for those interested in the search of affordable housing initiatives in the Harris County service area.

**Strategy Three.** Promote the development of collaborations and partnerships of both non-profit and for-profit builders, developers, and other interested parties for the purpose of increasing the capacity for the development of affordable housing in the Harris County service area.

**Strategy Four.** Promote and assist in the development of applications for additional funds for the use in development of affordable housing in the Harris County service area, including Low-Income Housing Tax Credits and Homeownership Zones.

**Strategy Five.** Promote and provide technical assistance for the review and revision of land-use regulations in cooperative cities that may present an obstacle in the development of affordable housing.

### Strategies for Fair Housing

The Harris County Fair Housing Plan contains the following:

**Strategy One:** *Aggressively enforce and enhance existing fair housing laws.*

To continue the enhancement of the principles of Fair Housing, Harris County and its subrecipients should undertake an aggressive fair housing program that includes:

- Information on fair housing issues
- Public Education
- Counseling
- Conciliation
- Referral and follow-up for fair housing compliance and/or redress
- Pro-active rental testing for fair housing compliance

**Strategy Two:** *Eliminate discriminatory lending.*

The County should investigate methods to encourage reinvestment by private lending institutions in needed areas of its jurisdiction. Public-private strategies will be developed to promote reinvestment in housing and other sectors, particularly in disadvantaged communities.

**Strategy Three:** *Eliminate barriers to affordable housing development.*

The County should work to educate community groups about the benefits of affordable housing development at the front end of the development so they can have empowering input in the development process. In this fashion, community groups are included in the overall process. Harris County continues to promote and provide technical assistance for the review and revision of land-use regulations in cooperative cities to allow for the development of affordable, accessible housing.

**Strategy Four:** *Encourage educational activities that promote awareness about fair housing and individuals rights about fair housing choice.*

Local public announcements should be created and sent to local media, including public television, radio, and newspapers and placed on the CSD website, particularly during National Fair Housing events. Pamphlets should also be developed and given to the general public. Additionally, posters should be sent to non-profits, civil rights groups, and community action agencies on fair housing law.

**Strategy Five:** *Encourage assistance to families.*

Activities should be undertaken by those entities that have a vested interest in the rental and sale of housing to lower income families. These activities could include:

- Mortgage lending counseling
- Rental maintenance counseling
- Referral programs for home seekers and renters
- Budget/credit counseling for first time homebuyers
- Foreclosure/forbearance assistance
- Emergency Housing assistance

## Lead-Based Paint Hazard Reduction Strategy

Effective September 15, 2000, all housing activities supported by funding administered by HUD's Office of Community Planning and Development must comply with lead-based paint regulations (Title X of the Housing and Community Development Act of 1992). The changes will affect housing rehabilitation activities, tenant-based rental assistance, and acquisition, leasing, support services and operations. The new regulation changes the acceptable work practices and expands the requirements to protect occupants and workers from lead-based paint hazards. In addition, it requires testing for lead, stabilization, control or abatement in the event that lead is found on the property. Certain programs will have the additional responsibility of on-going maintenance and record keeping. The impact of the new regulations on existing programs will be in several areas such as budgeting, productivity, and staff training.

In response to the changes in regulations, Harris County will continue to implement HUD's Lead-Based Paint Hazard Reduction strategy. This strategy includes incorporating the approved Lead-Based Paint Hazard Reduction regulations into all housing programs operated by CSD and those programs funded/operated by subrecipients. Subrecipient training will continue to include information regarding implementation, documentation and reporting on all housing activities that are affected by changes in regulations.

Other strategies for lead based paint hazard reduction include the continued support of the Harris County Public Health and Environmental Services Department's Childhood Blood/Lead Screening/Abatement program. Through these programs Harris County will actively pursue the reduction of the number of lead based paint hazards in the Harris County service area.

## Goals and Measurable Objectives

**HOUSING GOAL:** To create the opportunity for adequate, affordable, accessible housing for homeless, extremely low-, low-, moderate-, and middle-income persons through eventual elimination of lead based paint hazards, encouragement of homeownership, minor home repair, rehabilitation of single-family and multi-family housing, provision of rental assistance, new construction, and development of partnerships.

In an effort to address affordable housing characteristics of the housing market and the severity of housing problems and needs, this section provides goals and measurable objectives for establishing priorities for the use of funds made available for rental assistance, production of new units, rehabilitation of existing units, or the acquisition of existing units.

Due to the County's diverse housing needs, CSD plans to use HOME funds for tenant based assistance in order to better address client needs with respect to family size, special

needs, or other characteristics. According to HUD, the 2011 Fair Market Rent for Harris County is \$913 for a two bedroom apartment. As such, in Texas, the average person making the minimum wage of \$7.25 per hour would find it necessary to work 99 hours per week to afford funds for a two-bedroom apartment at fair market rent. Tenant based assistance allows support to better reach extremely low- and low-income clients, and allows them to find apartments that better suit their needs (size, location).

## **Owners**

### **Objective 1: Homeownership (13)**

To provide 800 individuals and families with the opportunity for homeownership by February 28, 2012, thus improving quality of life and supplying decent housing. This objective will be accomplished through financial assistance to prospective homebuyers. Financial assistance includes, but is not limited to downpayment and closing cost assistance. Programs providing Downpayment and Closing Cost services should provide a minimum of \$10,000 in downpayment and closing costs per eligible program participant. Harris County places a high priority on projects servicing seniors, the disabled, and persons with HIV/AIDS.

### **Objective 2: New Construction (12)**

To provide assistance to aid in the construction of 15 affordable housing units within the Harris County service area by February 28, 2012 for the purpose of supplying decent housing for low- and moderate income owner occupied households. Harris County places a high priority on projects servicing seniors, the disabled, and persons with HIV/AIDS.

### **Objective 3: Single Unit Minor Rehabilitation (14A)**

To provide assistance to 100 low- to moderate-income homeowners with minor home repair assistance within the Harris County service area by February 28, 2012 for the purpose of supplying decent housing for low- and moderate-income households. Minor home repair assistance includes, but is not limited to rehabilitation of septic systems, emergency home repairs, water wells, and roof repair. Harris County places a high priority on projects servicing seniors, the disabled, and persons with HIV/AIDS.

### **Objective 4: Lead-Based Paint Abatement (14I)**

To assist in the abatement of lead based paint hazards in 150 owner-occupied, single-family housing units by February 28, 2012 for the purpose of providing safe and decent housing for low- and moderate-income households.



## Renters

### Objective 6: New Construction (12)

To provide financial assistance to aid in the construction of 200 affordable multi-family housing units within the Harris County service area by February 28, 2012 for the purpose of supplying decent housing to low-income renter households. Harris County places a high priority on projects servicing seniors, the disabled, and persons with HIV/AIDS.

### Objective 7: Acquisition of Multi-Family Housing (01)

To provide assistance to acquire 100 multi-family, affordable housing units in the Harris County service area by February 28, 2012 for the purpose of supplying decent housing to low-income renter households. (If acquiring and rehabilitating units use code 14G)

### Objective 8: Rehabilitation, Multi-Unit (14B)

To provide financial assistance to aid in the rehabilitation of 15 multi-family, affordable housing units in the Harris County service area by February 28, 2012 for the purpose of supplying decent housing to low- and moderate-income renter households.

### Objective 9: Rental Assistance (CDBG 05S and HOME 21F)

To provide tenant based rental assistance to 50 extremely low- and low-income Harris County families and individuals, by February 28, 2012 for the purpose of supplying decent housing for low- and moderate-income renter households.

### Objective 10: Lead Based Paint Abatement (14I)

To assist in the abatement of lead based paint hazards in 15 renter-occupied, single-family housing units by February 28, 2012 for the purpose of providing safe, decent housing for low- and moderate-income renter households.

Table 5.3 Summary of Affordable Housing Objectives According to Income

	Income				
	Total	Extremely-Low (0-30% MFI)	Low- (31-50% MFI)	Moderate- (51-80% MFI)	Homeless
<b>Owners</b>					
Obj 1: Homeownership	800	100	250	450	0
Obj 2: New Construction	15	3	5	7	0
Obj 3: Major Rehabilitation, Single Unit	50	5	20	25	0
Obj 4: Lead Based Paint Abatement	150	20	100	30	0
<b>Owners Subtotal</b>	<b>1015</b>	<b>128</b>	<b>375</b>	<b>512</b>	<b>0</b>
<b>Renters</b>					
Obj 5: New Construction	200	20	50	80	50
Obj 6: Acquisition of Multi-family Housing	100	20	20	60	0
Obj 7: Rehabilitation, Multi-Unit	15	5	5	5	0
Obj 8: Rental Assistance	50	35	10	5	0
Obj 9: Lead Based Paint Abatement	15	5	7	3	0
<b>Renters Subtotal</b>	<b>380</b>	<b>85</b>	<b>92</b>	<b>153</b>	<b>50</b>
<b>Total</b>	<b>1,395</b>	<b>213</b>	<b>467</b>	<b>665</b>	<b>50</b>

Table 5.4 Priority Housing Needs/Investment Plan Goals (Table 2A)

<b>Priority Need</b>	<b>5-Yr. Goal Plan</b>	<b>Yr. 1 Goal Plan</b>	<b>Yr. 2 Goal Plan</b>	<b>Yr. 3 Goal Plan</b>	<b>Yr. 4 Goal Plan</b>	<b>Yr. 5 Goal Plan</b>
<b>Renters</b>						
0 - 30 of MFI	90	18	18	18	18	18
31 - 50% of MFI	117	23	23	23	24	24
51 - 80% of MFI	173	35	35	35	34	34
<b>Owners</b>						
0 - 30 of MFI	128	25	25	26	26	26
31 - 50 of MFI	375	75	75	75	75	75
51 - 80% of MFI	512	104	102	102	102	102
<b>Homeless*</b>						
Individuals	1,000	200	200	200	200	200
Families						
<b>Non-Homeless Special Needs</b>						
Elderly	500	100	100	100	100	100
Frail Elderly						
Severe Mental Illness						
Physical Disability	100	20	20	20	20	20
Developmental Disability						
Alcohol/Drug Abuse						
HIV/AIDS	50	10	10	10	10	10
Victims of Domestic Violence						
<b>Total</b>	3,045	610	608	609	609	609
<b>Total Section 215</b>						
212 Renter						
215 Owner						

\* Homeless individuals and families assisted with transitional and permanent housing

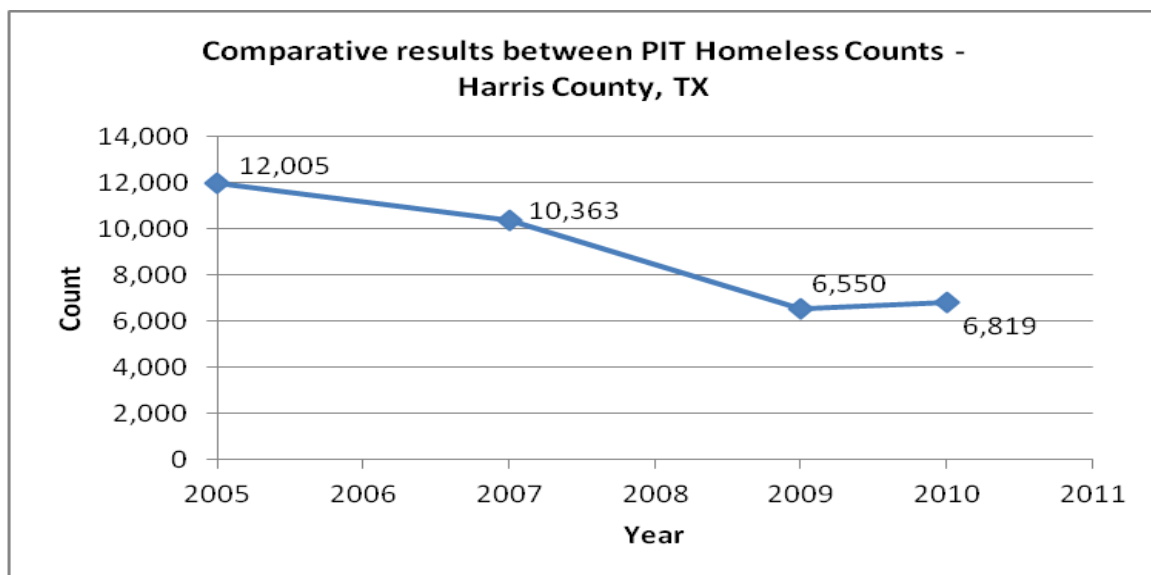
Table 5.5 Priority Housing Activities (Table 2A)

Priority Need	5-Yr. Goal Plan/Act	Yr. 1 Goal Plan/Act	Yr. 2 Goal Plan/Act	Yr. 3 Goal Plan/Act	Yr. 4 Goal Plan/Act	Yr. 5 Goal <u>Plan/Act</u>
<b>CDBG</b>						
Acquisition of existing rental units	100	20	20	20	20	20
Production of new rental units	200	40	40	40	40	40
Rehabilitation of existing rental units	15	3	3	3	3	3
Rental assistance	50	10	10	10	10	10
Acquisition of existing owner units						
Production of new owner units	15	3	3	3	3	3
Rehabilitation of existing owner units	100	20	20	20	20	20
Homeownership assistance	800	160	160	160	160	160
<b>HOME</b>						
Acquisition of existing rental units	100	20	20	20	20	20
Production of new rental units	200	40	40	40	40	40
Rehabilitation of existing rental units	15	3	3	3	3	3
Rental assistance						
Acquisition of existing owner units						
Production of new owner units	15	3	3	3	3	3
Rehabilitation of existing owner units	100	20	20	20	20	20
Homeownership assistance	800	160	160	160	160	160
<b>HOPWA</b>						
Rental assistance						
Short term rent/mortgage utility payments						
Facility based housing development						
Facility based housing operations						
Supportive services						
Other						

## Homelessness

Homelessness in Harris County, Texas, has fluctuated over the last seven years. Refer to the graph below for the comparative results of the Coalition for the Homeless' Point-in-Time survey conducted annually. Unemployment, low job growth, and a host of other economic problems have combined to maintain the homeless problem. Social problems have also contributed to slightly increased homeless numbers. According to various reports from the Coalition for the Homeless Houston/Harris County, this fluctuation appears to reflect multiple factors, such as: the success of the concerted efforts of service providers, community leaders and the Coalition for the Homeless through the repeated rapid re-housing initiatives and the development of supportive housing for chronically homeless persons and those with mental illness; a rapidly growing population, specifically a quickly increasing extremely low- and low-income cohort; the increased use of illegal drugs; and a rising number of low-income single parent and teen-headed households, coupled with slowly evaporating support networks. As unemployment or underemployment rises, the ability for low-income individuals to pay necessary living expenses (rent, food, utilities, etc.) declines. According to HUD, the 2011 Fair Market Rent for Harris County is \$913 for a two bedroom apartment. As such, in Texas, the average person making the minimum wage of \$7.25 per hour would find it necessary to work 99 hours per week to afford funds for a two-bedroom apartment at fair market rent. Combine these figures with the added burden of childcare, healthcare, and other living expenses; it is understandable how individuals and families may slip into the crevices of homelessness and despair.

Graph 1. Comparative Results between Point-in-Time Homeless Counts



According to the 2010 Coalition for the Homeless Houston/Harris County Point-In-Time Enumeration Study, on the night of January 22, 2010 there were 6,819 sheltered and unsheltered homeless individuals (4,716 sheltered and 2,103 unsheltered). This number is a 4 percent increase from the point-in-time study of 2009. In creating a more complete view of homelessness in Harris County, the study also takes into account homeless

individuals in Harris County jail and those who would be homeless were it not for the assistance of vouchers for permanent supportive housing or rapid re-housing. These additional point-in-time figures increase the number of Harris County homeless individuals from 6,819 to 9,692. While housing supply in Harris County is not lacking, homeless individuals generally have a more difficult time accessing high enough paying jobs or supportive services that allow them to maintain sufficient housing.

In addressing its homeless problem, Harris County is proud to be a member of the Houston/Harris County Continuum of Care since 1992. The goal of the Collaborative not only reduces chronic homelessness, but also decreases episodic and transitional homelessness to the greatest extent possible. As of March 2006, the Collaborative had secured nearly \$100 million for Houston/Harris County to address the needs of homeless individuals. The Collaborative seeks to: (a) reduce chronic homelessness for unaccompanied disabled individuals who have been continuously homeless for at least a year, (b) implement the Homeless Information Management System (HMIS) a system of collecting, recording, and analyzing demographic information relating to homelessness, (c) to promote the development of affordable housing opportunities with a supportive service nexus, and (d) to promote the development of permanent housing.

## **Partnerships**

The Coalition for the Homeless has formed the following partnerships in furtherance of its goals:

- U.S. Veterans Initiative, Inc. and the Texas Department of Housing and Community Affairs to develop housing for homeless veterans using tax credits, volunteer support, and construction expertise from Habitat for Humanity/Houston
- Bridge Over Troubled Waters Housing Initiative and City/County Officials to facilitate the development of two permanent housing projects serving persons with HIV/AIDS, substance abuse, and mental illness using Affordable Housing Bond Funds, CDBG funding, and Continuum of Care funding
- Area nonprofit organizations to develop new single room occupancy units (SRO) for the area.

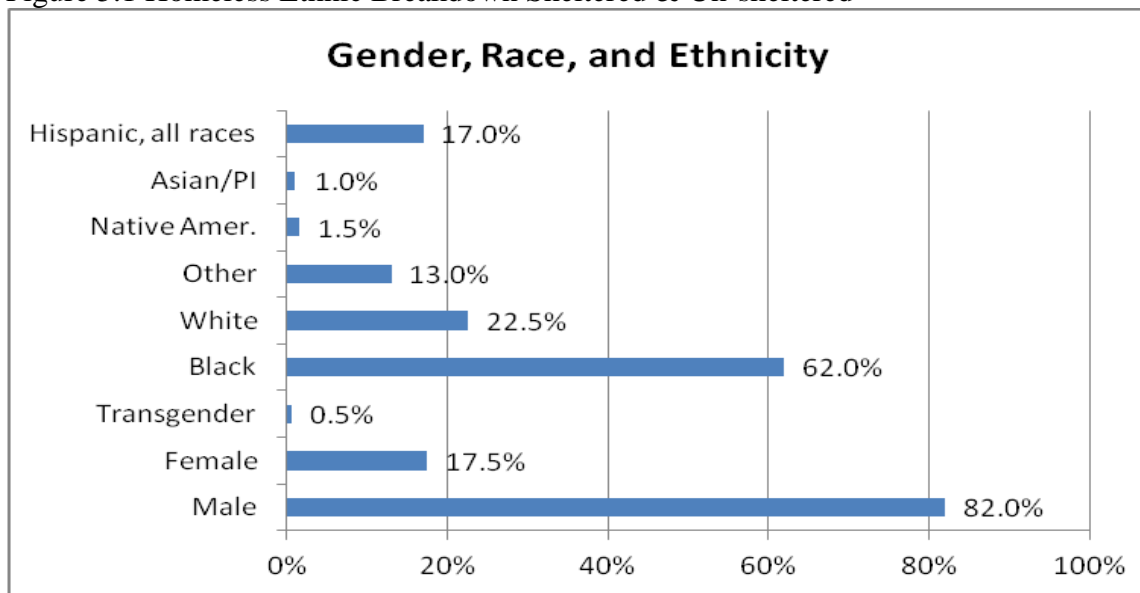
Hosted creative development workshops discussing affordable housing to foster the development of more units.

Harris County CSD has also developed intimate and productive partnerships with entities such as the Harris County Commissioners Court, the Coalition for the Homeless of Houston/Harris County, Inc., the state and local HUD office, mental health agencies, substance abuse facilities, civic leaders, and other state and local agencies which share the County's kindred purpose.

## Emergency Shelters

Shelters provide clean, safe, and habitable temporary accommodations for homeless persons. Unfortunately, shelters are only one phase in the lengthy process of allowing homeless persons and families to obtain permanent housing and supportive services. The Coalition for the Homeless of Houston/Harris County conducted its 2010 Homeless Enumeration and Needs Assessment / Point-In-Time (PIT) survey and the study resulted in a final count of 6,819 homeless individuals on the night of January 22, 2010. Of those individuals, 4,716 were sheltered. Of this client population, 62 percent were African-American, 23 percent were white, 17 percent were Hispanic, less than 2 percent were Native American, and 1 percent were Asian/Pacific Islander (Refer to Figure 5.1).

Figure 5.1 Homeless Ethnic Breakdown Sheltered & Un-sheltered



Source: 2010 Coalition for the Homeless Houston/Harris County Enumeration/Needs Assessment

Comparing these figures with the 2006 Mayor's Report gives a more accurate picture of shelter populations. This report estimates that 16 percent of homeless persons are severely mentally ill and 26 percent are substance abusers. Nevertheless, only 5 to 7 percent of homeless persons with mental illness require institutionalization, and the majority of those could live in the community (National Alliance on Mental Illness; Spending Money in the Wrong Places: The Uninsured, 2004). Previous surveys done by the U.S. Conference of Mayor's in past years have yielded the percent of homeless working to be as high as 24 percent. Employment also presents a major problem for sheltered persons. Over 19 percent of the sheltered individuals in the current survey were employed. Of the adult women, 29 percent were employed, while 26 percent of the adult men reported employment. Fulltime employment versus part-time employment among adult men was 11 percent and 15 percent respectively. This data is consistent with the U.S. Conference of Mayor's 2004 Survey of American cities, which found that 17 percent of the urban homeless population were employed (U.S. Conference of Mayor's, 2004)

The National Coalition for the Homeless Fact Sheet entitled “Why are People Homeless?” June 2007, finds that declining wages have put housing out of reach for many workers. In every state, more than the minimum wage is required to afford a one- or two-bedroom apartment at fair market rent. More specifically the Fact Sheet finds that: “Homelessness and poverty are inextricably linked. Poor people are frequently unable to pay for housing, food, childcare, health care, and education. Difficult choices must be made when limited resources cover only some of these necessities. Often it is housing, which absorbs a high proportion of income that must be dropped. Being poor means being an illness, an accident, or a paycheck away from living on the streets.”

**Table 5.6 Homeless Subpopulations Sheltered and Unsheltered**

Homeless Subpopulations	Sheltered	Unsheltered	Total
Chronically Homeless	1,403	566	1,969
Severely Mentally Ill	388	519	907
Chronic Substance Abuse	776	261	1,037
Veterans	356	420	776
Persons with HIV/AIDS	114	58	172
Victims of Domestic Violence	1,036	542	1,578
Unaccompanied Youth	19	33	52

*Source: 2010 Coalition for the Homeless Houston/Harris County Enumeration/Needs Assessment*

Given the serious problems that sheltered homeless persons and homeless families with children have such issues as substance abuse, mental illness, and unemployment; it is clear that there is a resounding need for facilities and services for sheltered homeless persons and homeless families with children (Refer to Table 5.6). Unfortunately, the inventory of transitional housing in Harris County does not meet this need. The Coalition for the Homeless of Houston/Harris County, Inc., *Homeless Service Demands 2004 Gaps Analysis Survey* reports turning away 38 percent of individuals seeking shelter over all. Also, 34 percent of those in families with children are unable to find transitional housing. A startling 60 percent of those individuals seeking permanent supportive housing are unable to find it, and 36 percent of those in families with children are turned away.

**Table 5.7 Homeless and Special Needs Populations (Table 1A)**

**Individuals**

Shelter		Current Inventory	Under Development	Unmet Need/Gap
	Emergency Shelter	980	30	1,673
Beds	Transitional Housing	1,396	89	719
	Permanent Supportive Housing	908	149	3,516
	Total	3,284	268	5,908

**Table 5.8 Homeless and Special Needs Populations (Table 1 A)**

**Persons in Families with Children**

Shelter		Current Inventory	Under Development	Unmet Need/Gap
	Emergency Shelter	577	80	643
Beds	Transitional Housing	1,270	0	906
	Permanent Supportive Housing	489	0	3,074
	Total	2,336	80	4,623

*Source for Table 5.7, 5.8: 2007 Coalition for the Homeless Houston/Harris County Continuum of Care Application*

The need for supportive services according to the 2006-2007 Coalition for the Homeless of Houston/Harris County Enumeration/Needs Assessment is also profound, particularly in the areas of clothing need and transportation; 78 percent of those surveyed seeking clothing could not be assisted; and 76 percent of those respondents could not find adequate transportation. Food service also represents a significant problem, with 70 percent of those in need being turned away for lack of funds and resources. (Refer to Table 5.7) Finally, dental care continues to remain a significant, but often overlooked problem for those who are homeless.

The National Coalition for the Homeless Fact Sheet Number 2 entitled “How Many People Experience Homelessness?” August 2007, finds that many people in homeless situations are forced to temporarily reside with friends and relatives in crowded arrangements. Of the children and youth identified as homeless by the State Department of Education in 2000, 35 percent lived in shelters. 34 percent lived doubled-up with family or friends, and 23 percent lived in motels and other locations. The Fact Sheet concludes that these children and youth may not be recognized as homeless and may be denied access to shelter or the protections and services of the McKinney Vento Act (U.S. Department of Education).

Table 5.9: Services and Severe Needs-Individuals

Service Need	2011	2007	2005
Clothing	80.4%	78.3%	76.4%
Transportation	86.0%	75.6%	74.2%
Food Service	72.2%	70.1%	68.0%
Dental Care	73.4%	69.0%	74.2%
Housing Voucher	75.5%	68.4%	70.3%
Medical Care	75.0%	64.3%	66.5%
Information	61.3%	63.0%	64.6%
Job Placement	76.6%	63.0%	72.6%
Case Management	70.9%	62.1%	59.2%
Emergency Shelter	69.5%	62.1%	55.9%
Transitional Housing	68.8%	59.9%	57.7%
Rent Payment	61.8%	57.4%	57.7%
Job Training	65.4%	55.9%	65.9%
Legal Assistance	53.3%	48.9%	51.5%
Mental Health Care	53.2%	48.4%	46.0%
Utilities Payment Assistance	53.3%	44.5%	49.6%
Voice Mail	47.9%	44.1%	43.1%
Substance Abuse Counseling	39.4%	42.5%	46.5%
Child Care	27.7%	17.9%	23.4%

Source: Coalition for the Homeless Houston/Harris County Enumeration/Needs Assessment, 2006-2007

The 2010 Coalition for the Homeless Houston/Harris County Enumeration/Needs Assessment reports that there is 6,819 homeless on the street on any given night, with that number rising to 9,692 when adding homeless persons who spent the night in the Harris County jail and would otherwise be homeless if not for permanent or rapid re-housing programs. This suggests that there is an unmet need for beds at emergency, permanent and transitional shelters (Refer to Table 5.10). The National Coalition for the



Homeless Fact Sheet Number 2 entitled, “How Many People Experience Homelessness?” reports that people who lack a stable permanent residence have few shelter options because shelters are unavailable or filled to capacity. In addition, the numbers are better for families with 29 percent of emergency shelter requests from families being denied, representing a 23 percent decrease from the previous year. The 2006 U.S. Conference of Mayors Report found a 9 percent increase in requests for emergency shelter.

A review of homelessness in fifty cities found that in virtually every city, the estimated number of homeless persons greatly exceeded the number of emergency shelter and transitional housing spaces (National Law Center on Homelessness and Poverty, 2002). As such, in Harris County the tremendous need for facilities and services for unsheltered homeless persons and homeless families with children resemble the national statistics. Economic stagnation, rising unemployment, mental illness, substance abuse, and a host of other socio-economic problems shall compound the need for such facilities and services in the foreseeable future.

Table 5.10 Homeless Population and Subpopulations (Table 1 A continued from pp. 23)

Homeless Population	Sheltered		Un-Sheltered	Total
	Emergency	Transitional		
Number of Families w/ Children (Family Households):	368	476	273	1117
1. Number of Persons in Families w/ Children	636	976	336	1948
2. Number of Single Individuals and Persons in Households w/out Children	1202	1902	1767	4871
(Add Lines Numbered 1 & 2 Total Persons)	1838	2878	2103	6819

Source: 2010 Coalition for the Homeless Houston/Harris County Enumeration/Needs Assessment

Table 5.11 Homeless Population and Subpopulations (Table 1A cont. from pp. 23)

Homeless Subpopulations	Sheltered	Unsheltered	Total
Chronically Homeless	1,403	566	1,969
Severely Mentally Ill	388	519	907
Chronic Substance Abuse	776	261	1,037
Veterans	356	420	776
Persons with HIV/AIDS	114	58	172
Victims of Domestic Violence	1,036	542	1,578
Unaccompanied Youth	19	33	52

Source: 2010 Coalition for the Homeless Houston/Harris County Enumeration/Needs Assessment

## Homeless Subpopulations

The state of being homeless both causes and intensifies poor health. Homeless populations are at higher risk for chronic, uncontrolled medical conditions such as asthma, cardiovascular diseases, and diabetes than are people in stable housing (Bonin et al. 2004, Zerger 2002).

Health conditions requiring regular and uninterrupted treatment-including tuberculosis, HIV, substance dependence, and mental illness-are extremely difficult to manage for people that are homeless. Poor diet, exposure to the elements, lack of health insurance, irregular access to primary care, and stressors associated with homelessness increase the risk for complications of acute and chronic illness. It is unsurprising that homeless individuals often go without critically needed care, tend to require high levels of health services, and they often obtain these services through hospital emergency departments (Gundlapalli et al. 2005, McMurray-Avila 1999).

The homeless population in Harris County may be separated into eight (8) distinct subpopulations: chronic substance abuse; seriously mentally ill; dually diagnosed; Veterans; persons with HIV/AIDS; victims of domestic violence; youth; and other. This text shall discuss each of these categories.

#### Chronic substance abuse/mental illness

The unmet need for chronic substance abusers is approximately 41.5 percent in Harris County for individuals. The 2005 Homeless Service Demands Survey by the Coalition for the Homeless of Houston/Harris County found that of the sub-populations most likely to be turned down for services in Houston were chronic substance abusers. As such, the needs of the homeless substance abuser are clearly profound.

According to the 2006-2007 Coalition for the Homeless Houston/Harris County, the greatest proportion of people with mental illness who are homeless reside on the streets is a number which becomes more noteworthy when the number of persons who are in shelters is added to that rate, which is reasonable since shelters often house clients only overnight. Thus, 73.4 percent of this group is essentially living on the streets. Further, the findings reveal that the 136 respondents, who were homeless 5 years ago, remain so. At least in this sample 21.4 percent have been homeless at least 5 years. Rates of incarceration were consistent with other groups.

Data from the Texas Commission on Alcohol and Drug Abuse –1998 (TCADA) indicates that 18.3 percent of total admissions to TCADA funded programs in Harris County are homeless, while 74.5 percent report living with family. Given that the data also indicates that 24.5 percent of admissions were employed, it is clear that many chronic substance abusers are either effectively homeless, but living with family or on the fringes of becoming homeless. These individuals may not only be in need of shelter, but are also in need of supportive services for their chemical dependency.

#### Dual Diagnosis

In an article in *The Mental Health Review* (2005), by Yvonne Walsh, dual diagnosis is defined as an individual that has two concurrent disorders. One would be substance abuse misuse, and the other would be a mental health disorder. The National Comorbidity Study in the *Journal of the American Medical Association* (1990) found that the rate of substance problems among individuals in the general population who had a mental disorder was twice as high as the rate among those with no mental disorder. It also

found that the rate of mental disorders in individuals with a substance problem was also twice the rate of those without substance problems.

The *2000 Texas Survey of Substance Use Among Adults* found that adults with substance abuse problems and those who were dependent on drugs were more likely to report mental health symptoms. Twenty-four percent of substance abusers and 49 percent of individuals dependent on substances had mental health symptoms. As such, those with mental health problems were almost twice as likely- 28 percent as those who did not have mental health problems, 15 percent had a substance use disorder, primarily substance dependence. A total of approximately 5.8 percent of adults in Texas, or approximately 868,000, can be considered to have had problems with substances and mental health issues in the year 2000.

Table 5.12 Multiple Problems or Disorders Among Texas Adults, 2000

Problem or Disorder	Percent of Texas Adults	
No disorder	66.3%	(9,921,835 adults)
Single disorder	26.8%	(4,010,636 adults)
Substances only	11.0%	
Mental health only	14.6%	
Gambling only	1.2%	
Dual disorder	6.3%	(942,799 adults)
Substances/mental health	5.1%	
Substances/gambling	0.7%	
Gambling/mental health	0.5%	

*Source: Texas Commission on Alcohol and Drug Abuse-2000 Texas Survey of Substance Use*

According to the American Psychiatric Association, the importance of implementing evidence-based practices in the treatment of homeless people who have severe mental illness are areas of need: medications prescribed within specific parameters, self-management of illness, assertive community treatment, family psycho education, supported employment, and the integration of substance abuse and mental health treatments. Often, however, these tested treatments are not provided to clients of the public mental health system. At the same time, resources are being deployed toward services for which practical support is lacking.

### Veterans

According to The U.S. Department of Veterans Affairs Fact Sheet (Sept. 2006), approximately one-fourth (1/4) of the adult homeless population have served in the United States Armed Forces. There is currently approximately 200,000 veterans (male and female) living in shelters or on the streets. It also estimates that almost twice as many may experience homelessness at some point during the course of a year. Still other veterans exist on the fringes of homelessness because of a lack of support from family and friends, and poor living conditions in overcrowded or substandard housing. The number of homeless Vietnam era veterans is greater than the number of service persons who died during that war. Finally, a small number of Desert Storm veterans are also appearing in the homeless population. According to the analysis, the overwhelming majority of the homeless veteran population is men while women represent only 4

percent. Approximately 50 percent of homeless veterans suffer from mental illness, and a little more than 70 percent suffer from alcohol or other drug abuse problems. About 56 percent of the homeless population is African-American or Hispanic (Department of Veteran Affairs, August 2007).

Each year, the Department of Veterans Affairs publishes a report for its Project CHALENG program (Community Homelessness Assessment, Local Education and Networking Groups) for Veterans. Project CHALENG is a program designed to enhance the continuum of care for homeless veterans provided by the local (VA) and its partner community service agencies. Project CHALENG functions under the premise that no single agency can provide the full spectrum of services required to assist homeless veterans in re-assimilating into mainstream society. According to the 2007 CHALENG Report found that the need for permanent housing, emergency housing, and transitional housing remains high for the veteran population. The report also found that job finding and job training leads to secure employment was a high unmet need in the homeless veteran population. Childcare also ranked as a very high need in the homeless veteran population. More specifically, survey respondents noted the need for childcare while the veteran is seeking job training or employment, while in treatment, and while his or her dependents are attempting to find shelter together. Other needs included Dental Care, Substance Abuse Treatment, Re-Entry Services for Incarcerated Veterans, and Psychiatric Services.

In addressing some of the needs of its homeless veteran's population, Harris County has a Veterans Service Office. The Veterans Service Office has developed fruitful partnerships with local agencies that serve the veterans population. Partnerships such as the Houston Veterans Medical Center, transitional and permanent living facilities, drug treatment facilities; and a host of other agencies, which serve a kindred purpose. The Veterans Service Office also assists veterans and their dependents or widows to file claims related to their veteran status and alerts the public to programs that are available to assist the veteran population in the Harris County Region. The office also performs home visits to assist veterans in danger of homelessness in obtaining valuable benefits. Finally, the office provides referrals to veterans for a multitude of services in the community.

According to the 2006-2007 Coalition for the Homeless Houston/Harris County, the risk of homelessness for veterans is increasingly of concern to those who provide services to them. While vets make up 23.4 percent of the population of the chronically homeless, among vets who are homeless 41.3 percent meet the HUD criteria for chronic homelessness. Men over 50 are most often veterans of the Vietnam War and as men and women return home from Iraq and Afghanistan, the roles of young veterans who are homeless is rising, well before it would be expected for a returning group of soldiers.

#### Persons with HIV/AIDS

The AIDS Foundation of Houston estimates that over 1 percent of the population of the Houston area is HIV positive. According to the City of Houston Quarterly HIV/AIDS Update, Texas ranks as one of the ten leading states reporting the highest number of cumulative AIDS cases among residents as of June 2007, with 24,398 cases. Houston

ranked as one of the ten (10) leading metropolitan statistical areas reporting the highest number of cumulative AIDS cases among residents as of 2005, with 24,915 cases.

HUD notes that the lack of affordable and medically appropriate housing for persons with HIV/AIDS, as well as their families, is a very serious problem. Persons living with AIDS and their families should have stable housing to gain access to proper healthcare and to adhere to a complex drug therapy regime. The National Coalition for the Homeless Fact Sheet Number 9, entitled HIV/AIDS and Homelessness (August 2007), reports that persons with HIV/AIDS may lose their jobs as a result of discrimination or because of the frequent hospitalizations and fatigue caused by HIV-related illnesses. It also reports that persons living with AIDS may also have their incomes depleted by the costs of healthcare. The Fact Sheet also reports that the prevalence of HIV among homeless persons is between 3 percent and 20 percent nationally. Of nearly 12,000 people living with HIV/AIDS surveyed by AIDS Housing of Washington, 40% report having been homeless at least once in the past (Aids Housing of Washington, 2003). People living with HIV/AIDS are at higher risk of becoming homeless. A Los Angeles study found that 50% of domiciled people living with HIV/AIDS felt they were at risk of becoming homeless, while a Philadelphia study found that 44% of persons living with HIV/AIDS were unable to afford their housing, a risk factor for homelessness (Song, 1999).

Other problems related to persons with HIV/AIDS are as follows:

- Homeless adolescents are at a high risk of acquiring HIV/AIDS because exchanging sex for food, clothing, and shelter is their only chance of survival on the streets.
- HIV infected homeless persons are believed to be sicker than other infected persons in a stable living environment. For example, higher rates and more advanced forms of Tuberculosis (TB), and other illnesses.
- Homeless persons with HIV/AIDS encounter many barriers to optimal health care. As an example, injection drug use and lack of insurance, which are common amongst the homeless population, negatively affects the level of medical care and health status.

All of these figures indicate that homeless persons with HIV/AIDS need safe, affordable housing. Emergency housing grants should continue to be available to persons with HIV/AIDS, who are either homeless, or are in danger of losing their homes. In accomplishing this goal, Harris County has partnered with homeless providers, such as SEARCH, which also serve homeless persons living with HIV/AIDS. Such agencies are uniquely situated to address the problems that homeless persons with HIV/AIDS often have.

#### Housing for People Living With Aids

The Coalition for the Homeless of Houston/Harris County states that The Supportive Housing Program (SHP) is designed to develop housing and services that will allow homeless persons to live as independently as possible. Supportive housing in Harris County consists of the Madge Transitional Housing Project, which holds up to 16 units only for women and children.

According to HUD, the Shelter Plus Care Program (S+C) provides rental assistance for hard-to-serve homeless persons with disabilities in connection with supportive services funded from sources outside the program. There are 548 total units for shelter plus care in Harris County with 13 different grants delivered through 6 different agencies. HUD states that this program has a variety of housing choices, and a range of supportive services, in response to the needs of the hard-to-reach homeless population with disabilities.

According to the 2007 Houston/Harris County Continuum of Care Application there are 370 total year round beds for people living with HIV/AIDS. Also, the Coalition for the Homeless Houston/Harris County lists 10 various providers who provide beds for clients living with HIV/AIDS.

#### Hurricane Evacuees

In the fateful months of late August and late September of 2005 Hurricane's Katrina and Rita slammed into the Gulf Coast of the United States. In the aftermath of both storms, many evacuees came to Harris County to seek shelter and a new home. According to the 2006-2007 Coalition for the Homeless Houston/Harris County, Houston [Harris County] responded quickly and effectively to its neighbors in affected areas. Among providers were serious concerns that their systems of care, already functioning at or above capacity, would be further overwhelmed by a rapid and dramatic increase in homelessness. For the most part, this has not happened to the extent feared.

The report suggests that evacuees have found and been able to maintain housing, albeit many with assistance. Houston [Harris County] has been exceptionally resourceful in not only assisting evacuees, but also transferring systems of care and housing developed in response to the crisis to the system of care for homeless persons.

#### Chronically Homeless

The acute homeless, who consist of 10 percent of the homeless population, will be able to exit homelessness and the system of care within a year if they receive the assistance necessary. These clients only need small, but necessary, financial support to get back on their respective feet. On the other side of the spectrum are the chronically homeless, and this group consists of 35 percent of the homeless in Houston/Harris County. The Strategic Plan done by the Coalition for the Homeless Houston/Harris County in 2006 describes chronically homeless as persons that will require lifelong extensive care.

According to the 2006 Coalition for the Homeless Houston/Harris County Strategic Plan to Address Homelessness Houston/Harris County, most of the resources of service providers are expended on the chronically homeless. The plan says that this way of spending by providers usually leaves the homeless clients underserved and providers frustrated with the mandate to accomplish outcomes based on expectations that are not appropriate to these clients. This way of providing for the homeless only creates a bigger hassle than there should be. The Strategic Plan cites one example, in 2005 there were approximately 12,000 homeless persons in a point-in-time count, and 51 percent lived on

the streets. At the same time, the community had access to only 900 supported housing units. This was prior to August of 2005, and the Hurricane's that brought many evacuees to Harris County.

### Victims of Domestic Violence

The number of domestic violence incidents in Harris County is alarming. The Houston Area Women's Center (HAWC), reports that in Houston/Harris County, there were 20,050 incidents of domestic violence reported in 2005 where 9 women killed. In Texas, there were 187,811 incidents and 124 women were killed (Texas Department of Public Safety, 2006). HAWC also reports that nearly 5.3 million intimate partner victimizations occur annually against women over 18. Violence results in nearly 2 million injuries and 1,300 deaths (Center for Disease Control and Prevention, 2003). The amount of domestic violence cases where females were the victim severely outnumbered the cases where men were the victims. HAWC reported that 73 percent of family violence victims were females. Males accounted for about three-fourths of the persons committing family violence.

The National Coalition for the Homeless Fact Sheet Number 8, entitled "*Domestic Violence and Homelessness*," summarizes the unfortunate correlation between domestic violence and homelessness by stating "when a woman leaves an abusive relationship, she often has nowhere to go." It finds that a lack of affordable housing and long waiting lists for assisted housing equate to the fact that many women and their children must choose between abuse at home or living on the streets. Because shelters are frequently at capacity, the Fact Sheet estimates that 29 percent of requests for shelter by homeless families were denied in 2006 due to a lack of resources. (U.S. Conference of Mayors, 1998) Other figures which outline the scope of homelessness as related to victims of domestic violence are as follows:

- Fifty-percent of homeless women and children are fleeing abuse in the home. (National Coalition for the Homeless Fact Sheet #8, June 2007)
- Fifty-percent of cities surveyed by the U.S. Conference of Mayors identify domestic violence as the primary cause of homelessness. (National Coalition for the Homeless Fact Sheet #8, June 2007)
- Fifty-percent of the 24 cities surveyed by the U.S. Conference of Mayors identified domestic violence as a primary cause of homelessness. (U.S. Conference of Mayors, 2005)
- One-third (1/3) of suburban homeless clients report being physically or sexually abused before the age of eighteen. (Urban Institute, 1999)
- Among homeless women, 60 percent have children under 18; only 28 percent live with that parent; and the female parent or other relatives are likely to care for the minor children. Finally, at least 20 percent of the children have been placed in foster care. (Urban Institute, 1999).

### Youth

According to the National Coalition of the Homeless Fact Sheet Number 11, entitled "*Homeless Youth*," homeless youth is defined as individuals under the age of eighteen

who lack parental, foster, or institutional care. They are often referred to as “*unaccompanied youth*.” According to the U.S. Conference of Mayors 2005 Report, unaccompanied youth account for 3 percent of the homeless population. In the United States, the homeless youth population is estimated to be approximately 1,682,900 individuals each year. (Molino, 2007).

The Fact Sheet indicates that family problems, economic problems, and residential instability, are the three primary causes of homelessness among youth. It notes that many youth leave home to flee physical and sexual abuse, addiction of a family member, parental neglect, and strained relationships. A 1995 study by the U.S. Department of Health and Human Services entitled *Youth with Runaway, Throwaway, and Homeless Experiences... Prevalence Drug Use, and Other At-Risk Behaviors*, found that over half of the youth interviewed while at shelters reported either being instructed to leave the home or knew they were leaving and did not care. Still other youth may become homeless with their families, but may be later separated from them by shelter, transitional housing, or child welfare policies. The Fact Sheet also indicates that a history of foster care is also closely correlated to homelessness at an earlier age and remaining homeless for a longer period of time. It is also estimated that over one in five youth who arrived at shelters come directly from foster care.

Homeless youth face a multitude of problems living on the street. As a result of their age, homeless youth have few legal means to earn enough money to meet basic needs. As a result, many homeless youth are at a high risk of acquiring HIV/AIDS, because they must often exchange sex for food, clothing, and shelter. The Fact Sheet indicates that HIV prevalence studies anonymously performed in Houston found a median HIV-positive rate of 12.9 percent for homeless persons under age 25. (Marjorie Robertson, *Homeless Youth on Their Own*, 1996) Homeless youth often suffer from severe anxiety and depression, poor health and nutrition, and low self-esteem. They may also experience problems attending school because of a lack of proper records, legal guardianship requirements, residency requirements, and a lack of transportation.

Data regarding homeless youth in the Harris County area may be found in the Houston/Harris County Strategic Plan for the Homeless, conducted by the Coalition for the Homeless of Houston/Harris County, Inc. The findings are as follows:

- 364 homeless youth were sheltered in the reporting shelters.
- 56.6 percent of the youths in shelter were accompanied or sheltered with their parents.
- 43.3 percent of the youths in shelter were unaccompanied or without their parents.
- African-American youth compose 64.3 percent of the sheltered youth in Houston/Harris County.
- Hispanic youth compose 17.9 percent of the sheltered youth in Houston/Harris County.
- Caucasian youth compose 16.8 percent of the sheltered youth in Houston/Harris County.



- 16.7 percent of the sheltered youth in Houston/Harris County have reported physical disability.
- 37.1 percent of the total sheltered youth in Houston/Harris County have a reported substance abuse disability.
- Less than 2 percent of the sheltered youth in Houston/Harris County are reported to be employed.
- None of the sheltered youth in Houston/Harris County are reported to have HIV/AIDS.
- 3.7 percent of the sheltered youth in Houston/Harris County are reported to be pregnant or parenting.
- Males compose 57.5 percent of the sheltered youth in Houston/Harris County.
- Females compose 42.5 percent of the sheltered youth in Houston/Harris County.

### Elderly

Another homeless subpopulation that deserves serious mention is the homeless elderly. The National Coalition for the Homeless Fact Sheet Number 15 entitled “*Homelessness Among Elderly*,” defines the “*older homeless*” as those persons aged 50 and over who have fallen between the cracks of society, not old enough to receive Medicare, but because of poor diet, physical health, and severe living conditions, may resemble someone much older. Homelessness among elderly persons is mostly the result of the evaporating availability of affordable housing and poverty among the aging. The composition of households with worst case needs is diverse, but this number includes 1.29 million elderly households (National Low Income Housing Coalition, May 2007). Among very-low income households, households with an elderly head of household have nearly a one in three chance of having worst case needs.

Many elderly in Harris County live just above the poverty line, surviving off of meager Social Security and private pension payments. With less income for basic necessities as food, medicine, and health care, they are particularly vulnerable to homelessness. Elderly who become homeless may find themselves in an unending cycle of disparity, unable to work or gain income via other means that a younger, healthier person may find available. Couple this with the premise that because the homeless elderly find mobility difficult and often distrust crowds at shelters, they are more likely to sleep on the street. Older homeless persons are more likely to suffer from a variety of health problems, including chronic disease, high blood pressure, and functional disabilities, than other homeless persons.

In response to the homeless elderly problem, Harris County supports the recommendation of the National Coalition for the Homeless which states: “To prevent elderly Americans from becoming homeless, we must provide enough low-income housing, income supports, and health care services to sustain independent living. For those older adults who have already lost their homes, comprehensive outreach health and social services must be made available, as well as special assistance to access existing public assistance programs. Finally, like all people who are homeless or at risk of becoming homeless, elderly people need an adequate income, affordable housing, and affordable health care in order to stay securely housed.”

## Homelessness Prevention

The National Coalition for the Homeless Fact Sheet Number 12, entitled *“Homeless-Families with Children,”* states that one of the fastest growing segments of the homeless population are families with children. It is estimated that families with children make up approximately 41 percent of people who become homeless. The U.S. Conference of Mayors 2005 Report indicates that requests for emergency shelter by families with children increased by an average of 5 percent. The report also indicated that 32 percent of requests for shelter by homeless families were denied as a result of a lack of resources.

The primary causes of family homelessness are poverty and a lack of affordable housing. According to HUD, in recent years the shortages of affordable housing are most severe for units affordable to renters with extremely low incomes. With less income available for food and other necessities, these families are only an accident, illness, or paycheck away from becoming homeless. After 1980s, income growth has never kept pace with rents, and since 2000, the incomes of low-income households has declined as rents continue to rise (National Low Income Housing Coalition, 2005). Excessive waiting lists for public housing mean that families must remain in shelters or inadequate housing arrangements longer. Consequently, there is less shelter space available for other homeless families who must find shelter elsewhere or live on the streets.

As the supply of affordable housing erodes, poor families with children continue to suffer. A 1998 HUD Report entitled *“Rental Housing Assistance-The Crisis Continues: 1997 Report to Congress on Worst Case Housing Needs,”* indicates that families with children constitute 40 percent of households with “worst case housing needs” (those renters with incomes below 50 percent of the area median income who are involuntarily displaced, pay more than half of their income for rent and utilities, or live in substandard housing).

Many families with children in Harris County are currently in danger of becoming homeless. The Harris County Housing Authority PHA Plan 2011 Annual Update provides the following figures for families with housing needs:

- 35,572 families at or below 30 percent area median income
- 35,636 families whose income is greater than 30 percent, but less than 50 percent AMI
- 65,554 families whose income is greater than 50 percent, but less than 80 percent

In May 2006 the Blue Ribbon Commission to End Chronic Homelessness developed a Strategic Plan to address homelessness for Houston/Harris County. The purpose of this Strategic Plan is to provide guidelines to assure that permanent, secure and safe housing for all eligible persons will be acquired and maintained through the creation and implementation of: 1)public policies; 2)system management; 3)housing stock; 4)effective social services, public health and economic infrastructures that eradicate chronic homelessness and prevent and intervene in episodic and intermittent homelessness in a

context that is compassionate, effective and sustainable. In April 2007, Harris County CSD was asked to add a section to the strategic plan to address health care challenges for people that are homeless (See Appendix I).

## **Nature of Homelessness**

The 2010 Coalition for the Homeless of Houston/Harris County Enumeration/Needs Assessment notes that the ethnic makeup of the local homeless population closely resembles national averages, as well as the numbers from the 2007 Enumeration/Needs Assessment Study, and the Coalition for the Homeless Houston/Harris County Homeless Service Demands 2004. African-Americans made up 62 percent of the individuals counted, Hispanics made up 17 percent, Whites constituted 22.5 percent, Native Americans accounted for less than 2 percent, and Asian/Pacific Islanders made up 1 percent of the total population in emergency shelters.

## **Homeless Network of Providers**

The Coalition for the Homeless of Houston/Harris County, Inc. conducts a homeless needs assessment on an annual basis. The purpose of the survey is to present a picture of the current state of homelessness in Houston/Harris County. The survey provides a view of the homeless population in the communities of Houston and Harris County. The survey also provides corroboration that homelessness in Harris County exists, and closely resembles the state of homelessness throughout the nation. The following agencies participated in the Emergency Shelter Census Survey:

- Associated Catholic Charities
- Bay Area Homeless Services
- Bay Area Women's Center
- Bridge Over Troubled Waters, Inc.
- Army Harbor Light Men's Shelter
- Houston Area Women's Center
- Interfaith Hospitality Center-Humble
- Interfaith Hospitality Center-Northwest
- Montgomery County Women's Center
- Family Time Foundation, Inc. The Door
- Fort Bend County Women's Center, Inc.
- Star of Hope Women's & Family Emergency Shelter
- Open Door Mission
- Patrice House
- Salvation Army-Conroe/Montgomery County
- Salvation Army Family Residence
- Star of Hope Men's Development Center
- Star of Hope Transitional Living Center
- Covenant House Texas

## **Measurable Objectives**

**Objective 1: Outreach and Assessment (formerly Essential Services)** – To provide 3,500 units of outreach, assessment and other essential services for homeless persons and families to improve their overall quality of life and assist in moving them to self-sufficiency by February 28, 2012. Outreach and assessment services include but are not limited to counseling, case management, food and clothing distribution, job training and placement, life skills training, child care, health care, transportation, emergency dental care, education, housing placement and substance abuse treatment. Through the subreceptants, Harris County will focus on providing individual services to unsheltered and sheltered homeless people by participating in street outreach, connecting them with emergency shelter, housing, and/or critical services

**Objective 2: Homeless Prevention and Rapid Re-Housing (HPRP)** – To provide homeless prevention and rapid re-housing services to 500 persons and families at risk of homelessness by February 28, 2012 for the purpose of promoting the sustenance of decent housing for the extremely low-, low-, and moderate- income population. Homeless prevention services include but are not limited to emergency housing and utility assistance, security deposits, mediation and legal assistance, case management and counseling. Rapid re-housing services provide housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing. Rapid re-housing services include but are not limited to financial assistance and service costs.

**Objective 3: Emergency and Transitional Shelters** – To maintain and expand operations and support renovations and rehabilitation of structures to provide shelter for 10,000 homeless persons within new and existing emergency and transitional shelters by February 28, 2012 for the purpose of providing decent housing and essential services for the homeless population. Essential services include, but are not limited to counseling, case management, food and clothing distribution, employment assistance and job training, outpatient health services, legal services, life skills training, child care, transportation, services for special populations, and substance abuse treatment.

Table 5.13 Homeless Priority Needs Summary Table

<b>PRIORITY NEEDS</b>	<b>HOMELESS</b>	<b>PRIORITY NEED LEVEL High, Medium, Low, No Such Need</b>			<b>ESTIMATED DOLLARS TO ADDRESS</b>
Assessment/Outreach (Essential Services)	Families	Individuals	Persons w/ Special Needs		\$1,000,000.00
	M	M	M		
Emergency Shelter and Transitional Housing	Families	Individuals	Persons w/ Special Needs		\$40,000,000.00
	H	M	H		
Permanent Housing	Families	Individuals	Persons w/ Special Needs		\$95,000,000.00
	H	H	H		
Homeless Prevention	Families	Individuals	Persons w/ Special Needs		\$10,000,000.00
	H	H	H		

## Homelessness Strategies

Funding for homeless programs will be allocated to assist in five main program areas: Outreach and Assessment, Emergency and Transitional Shelter, Homelessness Prevention, Rapid Re-housing, and the Homeless Management Information System (HMIS). Focusing on these main components will allow Harris County, through its subrecipients, to expand and improve essential services, data collection, and prevention efforts.

- The Outreach and Assessment component provides essential services necessary to reach out to unsheltered and sheltered homeless people; connect them with emergency shelter, housing, or critical services; and assess their individual needs. Harris County, through its subrecipients, will execute these components through a number of avenues, such as (including, but not limited to): engagement – locating, identifying, and building relationships with sheltered and unsheltered homeless people; case management – assessing needs and coordinating individualized services; emergency health services – outpatient treatment provided by licensed professionals and; services for special populations – services for homeless youth, victims of abuse, and people living with HIV/AIDS.
- CSD will support outreach and assessment services by continuing to collaborate with the Houston/Harris County Coalition for the Homeless and other Continuum of Care partners on essential service identification and development. Additionally, CSD will continue to participate in the development of a centralized or coordinated assessment program.
- CSD will continue to seek subrecipient project proposals that contain outreach components focused on unsheltered and sheltered homeless persons.

- The Emergency Shelter component provides for essential services to homeless families and individuals in emergency shelters, renovating buildings to be used as emergency shelter for homeless families and individuals, and operating emergency shelters. Essential services include, but are not limited to counseling, case management, food and clothing distribution, employment assistance and job training, outpatient health services, legal services, life skills training, child care, transportation, services for special populations, and substance abuse treatment. Renovation includes, but is not limited to labor, tools, materials, and other costs. Operation includes, but is not limited to maintenance, rent, security, fuel, and utilities.
- The Homelessness Prevention component provides housing relocation and stabilization services and short- and/or medium-term rental assistance necessary to prevent an extremely low-, low-, and moderate-income individual or family from moving into an emergency shelter.
- With a focus on homeless prevention, CSD will engage in research and meetings with public and private partners in order to determine the most effective way to address those likely to become homeless after being discharged from publicly funded institutions and systems of care (such as health-care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); or receiving assistance from public and private agencies that address housing, health, social services, employment, education, or youth needs. CSD is currently in discussions with the Harris County jail system and the Mental Health and Mental Retardation Authority of Harris County (MHMRA) to determine the most effective way to absorb discharged persons into the system, tailor services, and create future housing opportunities.
- Homelessness prevention assistance will also be used to help the program participant regain stability in their current permanent housing or move into other permanent housing and achieve stability in that housing. Services such as Section 8 rental assistance, housing counseling, emergency financial assistance (for rent and utilities), consumer credit services, domestic violence counseling, and substance abuse treatment and prevention can assist extremely low- and low-income families transition to and/or remain in permanent housing.
- CSD will promote the transition of homeless individuals and families to self-sufficiency through funding support of permanent supportive and transitional housing. In addition, through various Harris County Housing programs such as the “Independence” Homeownership Program, Homeless Housing Program, and others, Section 8 families and individuals are able to move toward becoming self-sufficient, thereby increasing the availability of rental assistance opportunities for at-risk families.
- Rapid Re-housing provides housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing, and achieve stability in that housing.
- Harris County will support the ideals of Rapid Re-housing and expanded Medical Services for the homeless as stated in the Houston/Harris County Strategic Plan

for Homeless conducted by the Coalition for the Homeless of Houston/Harris County, Inc.

- The homeless prevention and rapid re-housing components provide for financial assistance costs – rental application fees, security deposits, last month’s rent, and utility deposits; and services costs – housing search and placement, housing stability case management, mediation, and legal services.
- The HMIS component provides for CSD to support the collecting, bolstering, and analyzing of HMIS data and reports. By integrating these data into the planning process, funding and essential services can become more aligned.

## Non-housing Community Development Activities

Non-housing community development includes every community development activity other than housing and homelessness. The number of units in need and estimated amounts to meet those needs of those units is given in the table below. Following the table are current conditions, needs assessments, and goals and objectives for each area of non-housing community development, which includes Public Facilities, Public Services, Infrastructure, Economic Development, Education and Workforce Development and Public Safety.

Table 5.14 Priority Community Development Needs (Table 2B)

HUD Category	Program Area	Need Level	Units of Need	Estimated \$
Anti Crime Programs	Overall	M	500,000	1,000,000
	Sub Categories			
	Crime Awareness (05I)	M	500,000	1,000,000
Economic Development	Overall	M	1,220	21,600,000
	Sub Categories			
	Rehab; Publicly or Privately-Owned Commercial (14E)	H	50	5,000,000
	CI Land Acquisition/Disposition (17A)	H	200	10,000,000
	CI Infrastructure Development (17B)	H	50	50,000,000
	CI Building Acquisition, Construction, Re (17C)	H	20	20,000,000
	Other Commercial/Industrial Improvements (17D)	L	200	100,000,000
	ED Direct Financial Assistance to For-Pro (18a)	H	100	30,000,000
	ED Technical Assistance (18B)	M	400	1,600,000
	Micro-Enterprise Assistance (18C)	H	200	2,000,000
Infrastructure	Overall	H	1,002,700	1,350,500,000
	Sub Categories			
	Flood Drainage Improvements (03I)	H	200	200,000,000
	Water/Sewer Improvements (03J)	H	1,000,000	100,000,000
	Street Improvements (03k)	H	1,000	1,000,000,000



HUD Category	Program Area	Need Level	Units of Need	Estimated \$
	Sidewalks (03I)	M	400	40,000,000
	Tree Planting (03N)	L	1,000	500,000
	Removal of Architectural Barriers (10)	L	50	5,000,000
	Privately Owned Utilities (11)	L	50	5,000,000
Planning & Administration (20)	Overall	H	200	100,000,000
Public Facilities	Overall	M	2709	181,000,000
	Sub Categories			
	Public Facilities and Improvements (03)	H	20	4,000,000
	Handicapped Centers (03B)	M	5	5,000,000
	Neighborhood Facilities (03E)	M	4	2,000,000
	Parks, Recreational Facilities (03F)	H	10	50,000,000
	Parking Facilities (03G)	L	50	5,000,000
	Solid Waste Disposal Improvements (03H)	M	30	30,000,000
	Fire Stations/Equipment (03O)	M	20	8,000,000
	Health Facilities (03P)	H	10	10,000,000
	Asbestos Removal (03R)	L	2000	2,000,000
	Clean-up of Contaminated Sites (04A)	M	500	50,000,000
	Interim Assistance (06)	L	10	10,000,000
	Non-Residential Historic Preservation (16B)	L	50	5,000,000
Public Services	Overall	H	72,000	116,000,000
	Sub Categories			
	Public Services (General) (05)	H	10,000	6,000,000
	Handicapped Services (05B)	H	8,000	10,000,000

HUD Category	Program Area	Need Level	Units of Need	Estimated \$
	Legal Services (05C)	M	1,500	1,000,000
	Transportation Services (05E)	H	6,000	12,000,000
	Substance Abuse Services (05F)	H	1,500	2,000,000
	Employment Training (05H)	H	15,000	50,000,000
	Health Services (05M)	H	10,000	20,000,000
	Mental Health Services (05O)	H	5,000	5,000,000
	Screening for Lead-Based Paint/Lead Hazard (05P)	H	15,000	10,000,000
Senior Programs	Overall	H	247,015	13,000,000
	Sub Categories			
	Senior Centers (03A)	M	15	10,000,000
	Senior Services (05A)	H	247,000	3,000,000
Youth Programs	Overall	H	1,104,015	126,000,000
	Sub Categories			
	Youth Centers (03D)	M	10	15,000,000
	Child Care Centers (03M)	H	4,000	10,000,000
	Abused and Neglected Children Facilities (03Q)	H	5	10,000,000
	Youth Services (05D)	H	900,000	6,000,000
	Child Care Services (05L)	H	110,000	10,000,000
	Abused and Neglected Children (05N)	H	90,000	75,000,000
Other	Overall	M	210	9,000,000
	Sub Categories			
	Urban Renewal Completion (07)	L	0	0
	CDBG Non-profit Organization Capacity Building (19C)	H	100	3,000,000
	CDBG Assistance to Institutes of Higher Education (19D)	L	10	5,000,000
	Repayment 108 Loan Principle (19F)	L	100	1,000,000

HUD Category	Program Area	Need Level	Units of Need	Estimated \$
	Unprogrammed Funds (22)	L	0	0

## Public Facilities

Public facilities serve as a resource for many of the social, financial, educational, and recreational opportunities available to extremely low-, low-, and moderate-income persons and communities. Often these sites serve as a gathering point for the community. It is estimated that over the next five years, Harris County will have applied approximately \$60 million toward the growth, expansion, and improvement of public facilities, including community centers, parks, libraries and health facilities (Harris County Capital Improvements Plan, 2000-2005).

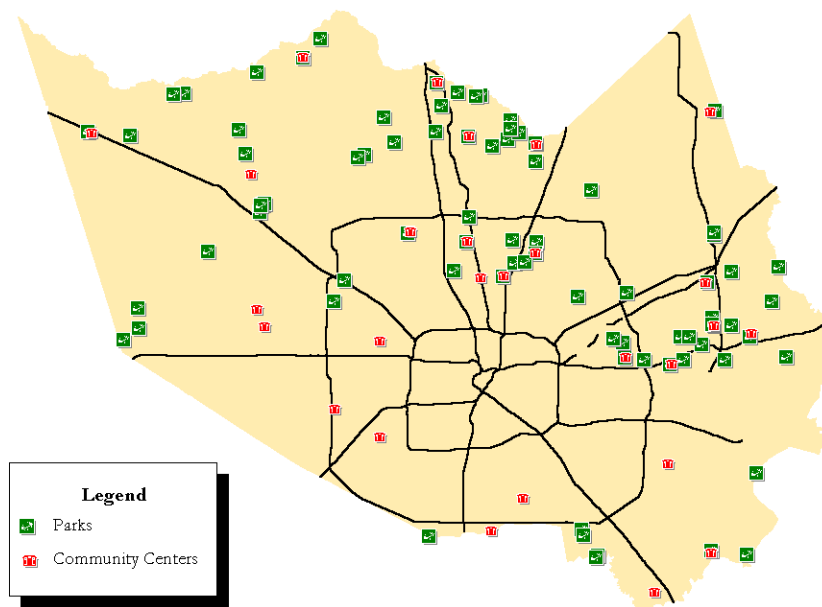
### Community and Social Service Centers

Community and social service centers offer a number of general and specialty programs and resources for the communities in which they reside. These services can greatly improve the quality of life of area residents. Youth and Senior Centers serve these targeted groups with programming specifically created to enhance and improve the physical, mental, and social well-being of the individual. Services may include arts and crafts, fitness, education, and social events.

#### Overview

- Community and social service centers offer a number of general and specialty programs and resources for the communities in which they reside. These services can greatly improve the quality of life of area residents.
- Harris County residents living outside Beltway 8 system must travel inside the beltway to find primary care hospitals, which may cause a burden to those residents who need immediate care.
- In a telephone survey completed in September 2000, a randomly selected group of Harris County residents were surveyed as to the need for parks, recreation facilities and open spaces.

Map 5.1 Harris County Parks and Community Centers



Source: Harris County Community & Economic Development Department

### Community Centers

Many communities have outgrown the current capacity of their centers while others have become obsolete. The cost, however, of building and renovating these facilities is high, and many communities lack the resources for construction and rehabilitation. Currently, Harris County is planning facility improvements or construction of six senior centers, two youth centers, and ten general use centers.

Table 5.15 Harris County Community Centers

Name of Center	Size of Center (sq ft)	Total Persons Served	# of Youth Served	# of Seniors Served
Christia V. Adair	1,400	500		60
Tom Bass	10,980			960
Alexander Deussen	8,000			120
“Pep” Mueller	1,967	900	900 YMCA	200
Barbara Jordan	2,950	500	200	
Challenger Seven Leaning Center	7,600	3,000	2,400	50
Hardy Sr. Center	12,000			350
Bay Area	14,442			
East Harris County	14,442			
V.V. Ramsey	6,510	2,300	155	2,145
Highlands	4,000	265	20	245
J.D. Walker	21,675	965	150	815
James Driver	1,200			
Riley Chamber	5,600	620	120	500
Loen Grayson/ Baldree	7,700 10,200	1,419		1,419
North East Harris	9,000	1,020	700	320
Bear Creek				
Hockley				
Mary Jo Peckham				
Tracy Gee				
Richard P. Doss	9,057	3,272	872	1,875
Matthews				
Vera May	3,785	2,184		1,183
Southwell				
Spring Branch	11,938	5,156	150	4,406

Note: Youth indicates persons 0-18 years. Elderly indicates persons 65+ years.

Source: Survey of Facilities and Project, Harris County, 2000 and 2003

### Education and Library Facilities

More than a million people in the Houston/Harris County area, according to the Houston Read Commission, cannot read or write a letter explaining a utility bill. Harris County residents, particular low- to moderate-income persons, need facilities that provide basic

education, vocational training, continued education classes, tutoring, and English as a Second Language (ESL) classes.

Harris County Library system provides programs for adults and children to learn to read and write. Harris County Library branches loan an average of five million books, films, and audiotapes per year. They offer 248 programs a month to area residents serving over 5,000 persons. Services for adults include literacy and English as a Second Language, tax assistance, and continuing education programs. Children's services included story time, summer reading programs, and children's choice election. Currently, no expansion or creation of branches is planned in the next three years in the target area.

Table 5.16 Harris County Library Branches and Circulation, 2002

Branch Name	Circulation	Branch Name	Circulation
Administrative Offices	n/a	Katy	77,370
Aldine	141,278	Kingwood	307,470
Atascocita	245,464	LaPorte	95,238
Baldwin Boettcher	46,759	Maud Marks	321,177
Katherine Tyra-Bear Creek	486,987	North Channel	217,723
Crosby	82,766	Northwest	297,101
Barbara Bush-Cypress Creek	380,993	Octavia Fields	138,850
Evelyn Meador	115,080	Parker Williams	220,146
Fairbanks	124,720	South Houston	75,167
Freeman Memorial	443,429	Spring Branch	169,782
Galena Park	56,182	Stratford	49,553
High Meadows	98,493	Tomball	163,857
Jacinto City	245,464	West University	177,819

Source: Harris County Public Library, 2002

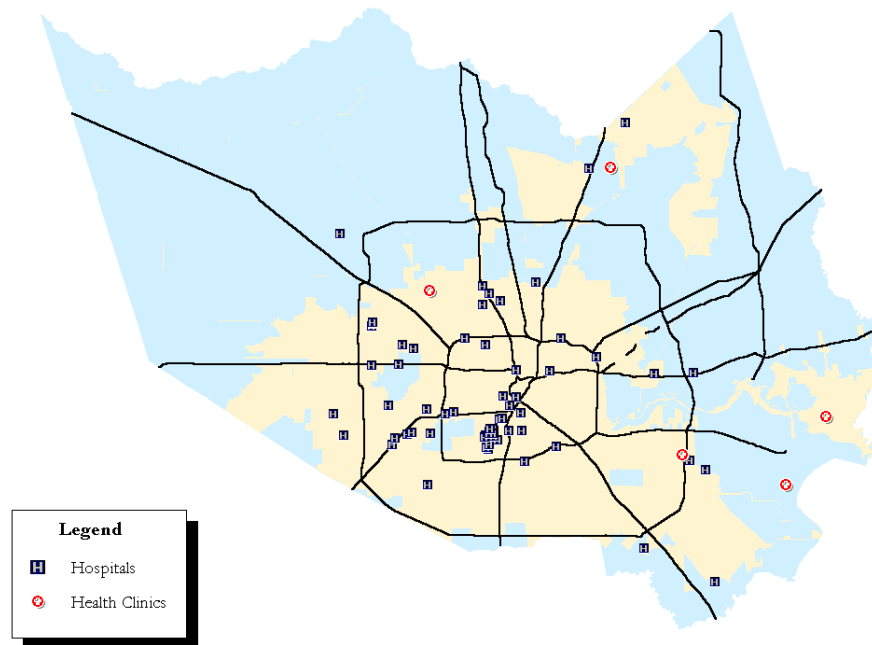
### Health Facilities

Harris County is a national hub of hospitals, medical research facilities, and clinics. Harris County is home to 59 acute care hospitals with approximately 15,000 licensed beds and 11,000-staffed beds. The county is also home to the Texas Medical Center, whose combined facilities and clinics account for over 6,000 beds. The major hospital systems in the region are Hermann-Memorial Healthcare System, Methodist Hospital and Texas Children's Hospital. The Harris County Psychiatric Center is a 250 bed acute care, public psychiatric facility, which delivers a comprehensive program of psychiatric and clinical social services. There are nearly 5,000 admissions annually to the center.

The Harris County Hospital District (HCHD) is a public healthcare provider and the largest health care provider in the Texas Gulf Coast area and sixth largest hospital system in the United States. The mission of HCHD is to deliver access to cost effective, quality health care and deliver it in a compassionate manner to all residents of Harris County regardless of their ability to pay. Within the District, there are three hospitals: Ben Taub General Hospital, one of two trauma centers in the area, Lyndon B. Johnson General

Hospital, and Quentin Mease Hospital. In 2000, Ben Taub served 23,500 adult and pediatric admissions and more than 143,000 specialty clinic visits. In addition to the main hospitals, the Thomas Street Clinic seeks to meet the needs of HIV or AIDS infection patients and serviced for more than 15,500 patient visits in 2000. As seen in Map 5.2 Harris County Hospitals and Health Clinics, the majority of hospitals are centrally located within the Beltway 8 system. Residents outside the beltway must travel inside the beltway to find primary care hospitals. This may cause a burden to those residents who need immediate care.

Map 5.2 Harris County Hospitals and Health Clinics



Source: Harris County Hospital District

A network of 11 community health centers has been established to provide local level health and dental care. These centers are located throughout Harris County. During 2000, Aldine Health Center provided health care services for more than 23,313 patient visits. In addition to regular adult and pediatric services, the centers may provide podiatry, dental, x-ray, mammography, lab, nutrition, health education and social services. As seen in Map 5.2, Harris County Hospitals and Health Clinics are primarily located in the center of Harris County and inside the City of Houston. Individuals in need of health care, living in the greater county area, may travel great distances to one of these facilities for safe and affordable health care.

In an effort to better meet the health care needs of the community, HCHD, in conjunction with four school districts, has established six school-based clinics in areas of the community that need it most. HCHD's school-based clinics provide health care to children in neighborhoods with limited healthcare services, and enable early detection of illness and intervention, as well as help promote children's health issues.

Children and adolescents from birth to 21 years may receive regular physical exams, primary preventive care, Texas Health Steps screenings, sports physicals, developmental assessments, vision and hearing testing, immunizations, lead and anemia screening and health education, treatment of minor and acute illnesses, management of chronic health problems such as asthma, and coordination of referrals for specialized care.

During 2000, HCHD school-based clinics provided healthcare services for more than 34,000 pediatric patient visits. These types of community-based clinics are in high demand for low- to moderate-income communities, particularly in the more rural areas of Harris County. The school-based clinic and community health clinics are needed and should be expanded into other low- to moderate-income communities, whose need for assisted health care is great.

Table 5.17 List of Harris County Hospital District Community Health Centers

<b>Harris County Hospital District Community Health Centers</b>	
Fannin Dental Center	Northwest Health Center
Acres Home Health Center	People's Health Center
Aldine Health Center	Martin Luther King Health Center
Baytown Health Center	Ripley Health Center
Casa De Amigos Health Center	Settegast Health Center
Houston Recovery Campus	Squatty Lyons Health Center
Strawberry Health Center	

Source: Harris County Hospital District

Harris County Public Health and Environmental Services provides a variety of personal health services including family planning, maternity and child health, nutrition, WIC, and immunizations in the Harris County service area. Public Health has five county clinics that provide health care services. The clinics are Antoine, Baytown, Humble, LaPorte, and Southeast Health Service Areas. Some of the programs available include dental health, disease control and epidemiology, HIV/AIDS education and testing, and occupational therapy.

## Parks and Open Spaces

Parks and open areas provide green space and add to the physical attractiveness of a community while serving as a social and recreational resource. Services provided at parks include softball fields, basketball courts, soccer fields, bike/walking trails, playground areas, and picnic areas. Parks are classified into one of six categories:

Table 5.18 Harris County Park Classifications\*\*

<b>Category of Park</b>	<b>Service Area</b>	<b>Size</b>	<b>Population Served</b>
Mini-parks	¼ mile radius	0-5 acres	500-2500
Neighborhood parks	½ mile radius	5-25 acres	2,000-10,000
Community parks	3 mile radius	25-150 acres	7,000-50,000
Regional parks	10 mile radius	150+ acres	Urban area



Greenway parks	N/A	Varying in size	
Special Use parks- generally single purpose facilities	N/A	Dependent on use	

*\*\*NOTE: Rates for population and acres, provided by the National Parks and Recreation Association, are based on urban density averages. Special consideration is given to lower density suburban and rural neighborhoods.*

*Source: Harris County Master Plan for Parks, Recreation and Open Space*

In a telephone survey completed in September 2000, a randomly selected group of Harris County residents were surveyed as to the need for parks, recreation facilities and open spaces. The results of the survey found:

- A need for Harris County precincts to expand their inventory of parks, particularly community and regional parks
- A need for additional soccer and ball fields
- A demand for expanded water access, boat launched and swimming beaches along the San Jacinto River and Galveston Bay

Ten park projects are planned for the next five years and include the addition of park acres, parking lots, roadways, and pavilions.

Table 5.19 Harris County Public Parks

<b>Name of Park</b>	<b>Number of Acres</b>	<b>Total persons served</b>
Adair	78	60,000
Almeda Road	42	10,000
Tom Bass I	260	50,000
Tom Bass II	108	40,000
Choate Road	41	10,000
Alexander Deussen	309	150,000
Gerber	1.5	5,000
El Franco Lee	344	70,000
Challenger Seven Memorial	292	50,000
Frankie Carter Randolph	93	60,000
Bill Crowley	30	20,000
Dixie Farm Road	40	10,000
Dow I	9	10,000
Dow II	6	25,000
Smokey Jasper	17	20,000
Barbara Jordan	8	40,000
“Pep” Mueller	13	35,000
Kirkwood South	3	15,500
Oxnard	14	10,000
Sagemeadow	3	15,000

<i><b>Name of Park</b></i>	<i><b>Number of Acres</b></i>	<i><b>Total persons served</b></i>
Sheldon	15	40,000
Hutcheson	3.5	20,000
Armand Bayou	2,500	
Bay Area	64	10,000
Baytown	6.2	3,000
Cedar Bayou	170.5	1,000
David Burnette	10	5,000
Cedar Grove	.6	500
Channelview Sports	31	30,000
Channelwood	6.4	2,000
Clear Lake	16	7,000
Cloverleaf	1	600
Dads Club Sports	17	9,000
David Burnett	10	6,000
Edna Mae Washington	30	8,000
F.M. 1942	130	30,000
Gray Sports	1	1,000
Halls Bayou Jogging Trail	1.4	2,000
Highlands	16	7,000
Highland Shore	6	2,000
Highlands Sports	16	8,000
James Bute	1.5	700
James Driver	15.5	6,000
Kipper Mease Sport	300	20,000
Meadowbrook	13	3,000
Moncrief	3.4	550
Northshore	46	7,500
Riley Chambers	31	9,000
Rio Villa	215	10,000
River Terrace	13	3,000
Seabrook Sports	8	10,000
Stratford	13	6,000
Sylvan Beach	31	25,000
White Oak Bayou Hike & Bike	10	15,000
Alief Amity	11	5,000
Bayland	68	7,000
Bear Creek	2,168	50,000
Carol Tree	1.5	700
Mary Jo Peckham	32.3	10,000
Four Seasons	32	8,000
Hockley	10	4,000
Katy	100	5,000
Kelb Woods Nature Preserve	130	

<b>Name of Park</b>	<b>Number of Acres</b>	<b>Total persons served</b>
Langham Creek	190	6,000
New Kentucky	3.9	1,000
Telge	102	4,000
Terry Hershey (Buffalo Bayou Park)		
Zube Park	139.4	6,000
gBayer	22	40,000
Bordersville	2	25,000
Roy Campbell Burroughs	320	75,000
Bane	10	40,000
Crosby	41	60,000
Crosby Sports Complex	13	50,000
Cypress Creek Site III	86	
Cypress Creek Site IV	74	
Cypress Creek Site V	234	
Cypress Creek Site VI	108	
Cypress Creek Site VII	139	
Cypress Creek Site VIII	189	
Cypresswood	55	75,000
Cypresswood Golf Club	852	30,000
Richard P. Doss	33	60,000
A.E. Dyess	113	65,000
Fritsche	91	70,000
Independence	5	25,000
Jesse Jones	226	85,000
Klein	8	30,000
Lindsay/Lyons Sports Center	108	100,000
Samuel Matthews	6	35,000
May I.T.	120	55,000
Mercer Arboretum and Botanical Gardens	249	90,000
Elizabeth Kaizer Meyer	286	100,000
Southwell	5	25,000
Spring Creek	114	75,000

*Source: Harris County Office of Housing & Economic Development, 2003 and Harris County Parks Plan 2001*

Communities receive great social and economic impact from public facilities, such as parks, community centers, and libraries. Public meetings identified a need for expanded and improved facilities. Harris County should seek to improve the condition of existing public facilities and add to the inventory by creating new facilities. Of particular need are facilities that improve the socio-economic status of Harris County residents.

## Goals and Measurable Objectives

**PUBLIC FACILITIES GOAL:** To provide, improve and maintain community facilities, which contribute to the quality of life for extremely low-, very low-, low-income persons living in the Harris County service area, particularly in target areas with special emphasis on the needs of youth, senior citizens and disabled persons.

### **Objective 1: General Public Facilities (O3)**

Provide improvements and/or construction of 10 public or social science facilities benefiting low-income areas by February 28, 2012 for the purpose of improving the quality of life of 20,000 residents of low-income communities, the homeless and disabled persons by promoting the availability of public facilities to meet unmet needs. General public facilities include but are not limited to community centers, health care centers, educational centers, and group home facilities.

### **Objective 2: Senior Centers (03A)**

Provide improvements to 5 senior center facilities located throughout the Harris County service area by February 28, 2012 for the purpose of improving the quality of life of 5,000 elderly individuals by promoting the availability of facilities to serve unmet needs. Senior centers are facilities that exclusively provide space for services to persons aged 62 years and older.

### **Objective 3: Youth Centers (03D)**

Provide improvements to 1 youth center located in the Harris County service area by February 28, 2012 for the purpose of improving the quality of life of 1,000 youth by promoting the availability of facilities to serve unmet needs. Youth centers are facilities that primarily provide space for services to persons aged 18 years and younger.

### **Objective 4: Parks (03F)**

Provide improvements to and/or construction of 10 parks/recreational facilities benefiting low-income areas in the Harris County service area by February 28, 2012 for the purpose of improving the quality of life of 10,000 residents of low-income communities by promoting the availability of green space and playground areas to serve recreational and leisure needs.

## Infrastructure

All residents and businesses in Harris County should have access to adequate utilities and transportation systems. On the whole, the county's existing infrastructure is aging and while governing entities should continue to expand infrastructure with growing areas, they must also maintain the old systems. Many of these older systems are located in the northern, eastern, and southeastern portion of the county. These areas are primarily served by Municipal Utility Districts (MUDs), Water Control and Improvement Districts (WCIDs), and individual homeowner septic systems.

### Sewage Systems

Ensuring that municipal utility districts (MUDs) adequately supply water and wastewater service in the unincorporated areas provides a significant challenge for Harris County. Utility districts are taxing entities authorized under Texas State law to make it easier to begin or expand subdivisions in unincorporated areas of Harris County. These entities are initiated by developers and are authorized by the state. Virtually all suburban areas developed in Harris County since the 1970s have relied on MUDs to raise money for the operation of existing wells and transmission/distribution lines, water treatment plants, wastewater facilities and streets.

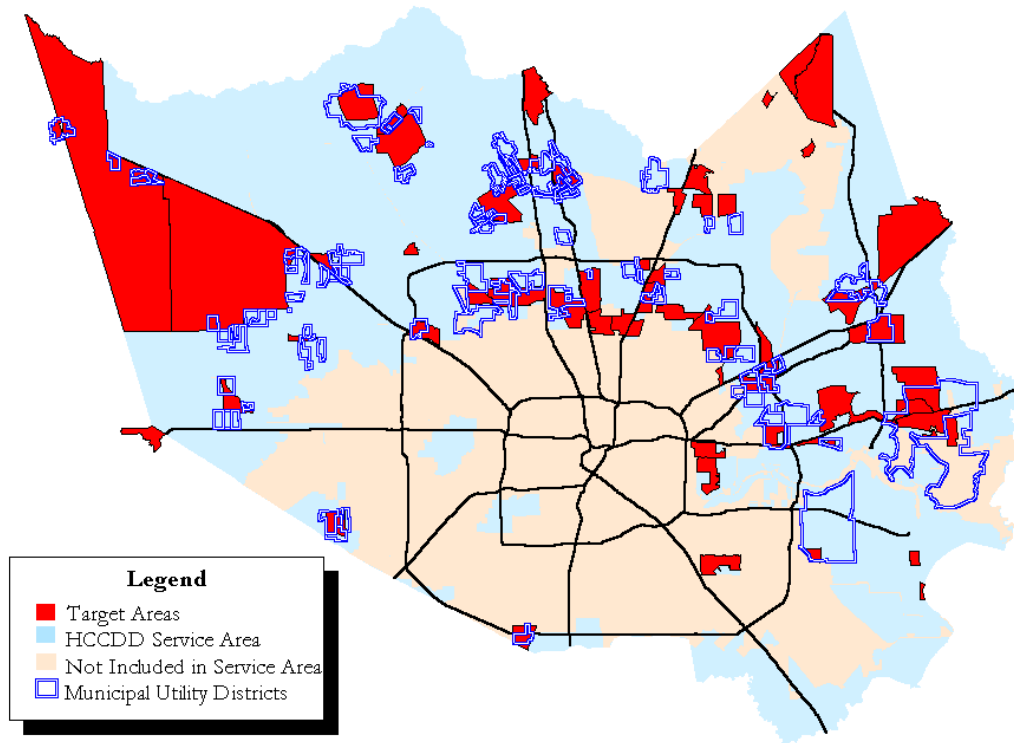
Like cities, MUDs borrow money by issuing bonds, and these earnings are tax-exempt. The district's accumulated debt can fall wholly on current residents. This would make their homes harder to sell in the future and can set off a trend of falling property values and rising taxes. Some of the least-solvent districts are located in the less-developed north and northeast parts of the county. The systems in these areas, such as the Aldine, McNair and Barrett Station target areas, have been placed under edict by the Texas Commission of Environmental Quality because of storm water infiltration, sewage backing into residents' yards and homes, and poor water quality. Target areas such as Linus and Cloverleaf have areas where no sewer lines exist and septic systems were not adequately installed.

Many areas in unincorporated Harris County are not included in a MUD, and have no access to water or sewer service. As seen in Map 5.3, there was a substantial portion of housing units within the service area without public sewer service. Homes not connected to a sewer system generally depend on septic systems and landfills for disposal of solid wastes.

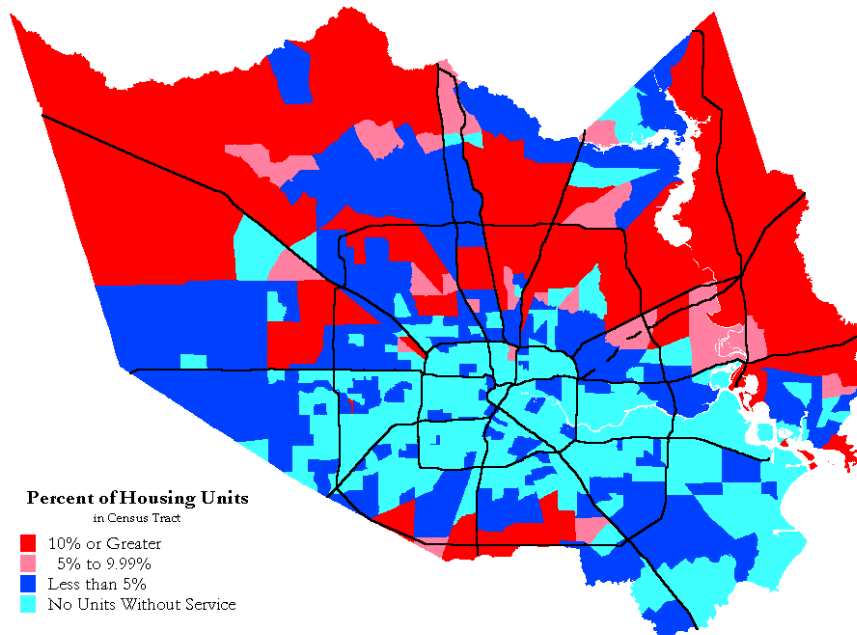
#### Overview

- Some of the least-solvent Municipal Utility Districts are located in the less-developed north and northeast parts of the county, such as the Aldine, McNair and Barrett Station target areas, and have been placed under edict by the Texas Commission of Environmental Quality.
- Almost half of the stream segments in the Houston-Galveston Area Council (HGAC) Clean Rivers Program study area have showed elevated levels of bacteria.
- The Harris County Flood Control District encompasses approximately 1,778 square miles, 22 major watersheds, and 3,000 miles of watercourses.

Map 5-3: Harris County Target Areas (Including Municipal Utility Districts)



Map 5-4: Units without Public Sewer Service, 2000



Harris County Precinct Two has sought to investigate areas of no water and sewer services. Unincorporated Harris County Precinct 2 has several neighborhoods that are without public water and/or wastewater services. Other municipalities and utility districts have been reluctant to annex these neighborhoods because of their respective challenges, including overflowing septic systems, polluted water wells, and the resultant diminishing property values. In the *Harris County Precinct 2 Unincorporated Area Revitalization Program Comprehensive Water and Wastewater Engineering Study*, the precinct identifies unincorporated areas within the precinct that are in need of service or revitalization to improve the environmental, public health, and economic well-being and provides recommended actions to provide service.

The study identified 22 un-served areas and prioritized 7 of those as “high priority communities.” All of the high priority communities currently rely on privately-owned septic systems and demonstrate a high level of need for wastewater improvements. These communities included:

- Grace Timbers, Highland Shores, Lloyd Clara, Mobile Homes Parkland, and Orchard Crossing
- Highland Mobile Estates and Highland Ridge
- Beaumont Place
- Hampton Oaks and Reservoir Acres
- Mary Eleanor
- Westfield Estates and Woodsdale
- Lakeview Heights

Federal and state legislation have also affected the provision of services of solid waste, water supply, wastewater and storm drainage in Harris County. The federal government influences Harris County’s storm water management efforts through these regulations and programs. The Federal Clean Water Act administered by the U.S. Environmental Protection Agency has the most direct impact. Originally the National Pollutant Discharge Elimination System (NPDES) established by the Clean Water Act sought to eliminate pollution from point sources (i.e., municipal and industrial wastewater discharges). In 1987, amendments to the act expanded the scope of the act to address water pollution due to nonpoint sources (i.e., storm water run-off.)

The NPDES has far-reaching implications for storm water management. As a condition for receiving storm water discharge permits, local governments must submit plans to the EPA detailing initiatives for minimizing water pollution due to run-off. These plans must contain provisions for assessing the impacts of new development on water quality, reduction of litter discharged into area waterways, disposal of solid and hazardous waste, and educating the public. Implementing NPDES may significantly affect local development regulations, municipal waste management, and other local government activities.

## **Fresh Water Supply**

Harris County's northern and western sections have historically relied on groundwater and have had limited access to surface water. However, Houston plans to expand its surface-water distribution network in the city's northern areas, which will make this area more attractive for future development. A 1989 water master plan outlined a conceptual surface-water transmission system that would serve all of Harris County.

### *Water Quality*

Almost half of the stream segments in the Houston Galveston Area Council (HGAC) Clean Rivers Program study area have shown elevated levels of bacteria (HGAC "How's the Water" Report 2007). HGAC's Clean Rivers Program encompasses four major basins: the San Jacinto River Basin, the Trinity-San Jacinto Coastal Basin, the San Jacinto-Brazos Coastal Basin, and the San Bernard River Basin within the Brazos-Colorado Coastal Basin. While the region's bayous are generally safe for canoeing or boating, they pose significant health risks if large amounts of water are ingested or received in an open wound. High toxicity levels are also present in the Houston Ship Channel and the smaller side bays that it feeds. Additionally, nutrient enrichment, which leads to algal blooms and negative impacts on aquatic flora and fauna, is a concern in several area waterways.

Elevated bacteria levels continue to be the overwhelming water quality issue throughout HGAC's basins. Nonpoint sources, those not associated with a wastewater treatment plant, appear to be the biggest contributor to the problem. Some of these sources include failing or improperly maintained septic systems and storm water runoff containing animal and pet waste. Sewage from failing sewer infrastructure often leaks into storm drains during dry weather, allowing wastewater to make its way to bayous, creeks, and lakes without treatment of any kind. There is also potential for wastewater collection system failure or overflow at the plant. Additionally, discharges from a pipe or wastewater treatment plant can never be ruled out and must continue to be monitored.

Toxic substances found along the Houston Ship Channel have resulted in a Texas Department of Health advisory on fish consumption in the industrialized area, including smaller side bays that receive water from the Ship Channel. The source of dioxin is unclear, but is not thought to come from point sources, since those discharges have not shown any dioxin in water quality samples. While ongoing investigation has not detected dioxin in the water column, fish and crab tissue show high levels of the contaminant. There has also been some detection of dioxin after rain events in tributaries that flow to the Ship Channel. The dioxin found may be in part remnant from sources no longer active or may result from atmospheric deposition and runoff associated with that deposition.

### *Subsidence*

In 1975 state officials called for extensive changes in the water-supply system that dramatically limited groundwater use by Houston and Harris County. As a result, the Harris-Galveston Coastal Subsidence District was created. It has issued regulations requiring that no more than 20 percent of Harris County's water supply come from



groundwater by 2020. With heavy groundwater extraction, water levels drop and pumps must be lowered. This has significant effect on the environment for more energy is expended to pull the water out. Also concentrating water extraction in certain areas reduces nature's ability to replenish groundwater sources. Well water also has been contaminated in some areas by naturally occurring gases and manmade chemical storage.

The area's past dependence on groundwater has resulted in subsidence in much of the Houston-Galveston region. Between 1906 and 1987, southeast Houston suffered the most severe subsidence, losing as much as nine feet of elevation. The subsidence district is divided into seven areas that must meet specific targets of groundwater withdrawal. Areas One, Two and Three -- consisting mainly of Galveston County, eastern Harris County and the City of Houston -- have, for the most part, converted to surface water.

MUDs must be monitored to ensure compliance with the Harris-Galveston Coastal Subsidence District. Harris County also needs to seriously assess the ability of MUDs to comply with federal and state environmental regulations, and to determine if the creation of additional MUDs in the unincorporated areas is an effective method of dealing with a regional water utilization program.

Harris County lacks an infrastructure network to address pressing issues such as water supply or waste disposal. This crucial concern brings to light several future water concerns such as lack of available water sources, predicting water needs of Harris County communities, and the status of wastewater systems. Another related concern is the effects of development on the capacity of storm drainage and coordination of local storm water management plans and policies.

Since collecting, treating, storing and distributing surface water is expensive; Harris County should revisit the idea to create a corporation or regional water authority that would represent about 300-north Harris County MUDs. That corporation could sell revenue bonds to build a pipeline and water-treatment plant to provide Houston-owned surface water to groundwater-dependent county residents. Until recently, most areas of Harris County could draw on plentiful groundwater supplies from the Chicot and Evangeline aquifers that, when combined, form one of the largest freshwater supplies in the nation. Under Texas law developers can draw on this source by establishing private MUDs to provide water and wastewater services without waiting for local governments to do so. In the past, the state freely approved permits for MUDs. According to the most recent count, approximately 480 MUDs currently operate in Harris County. Of these MUDs, 35 percent are in the City of Houston, and the remainder is located primarily in Houston's extraterritorial jurisdiction.

One obstacle in meeting subsidence is the \$300 to \$700 million-estimated cost of the project. When well users do express opinions on the issue, it is frequently that surface water is inferior to groundwater and that they do not want to rely on city water supplies. As Houston owns \$1.1 billion worth of surface-water rights -- including 70 percent of the water in Lake Livingston on the Trinity River, 66 percent of Lake Conroe on the San

Jacinto River, and all the water in Lake Houston -- it is virtually certain that unincorporated Harris County will buy surface water from the city.

Whatever entity is finally formed to manage the water project, it will have to sell revenue bonds to finance its operations. These bonds can be repaid through water-user fees once surface water is flowing through the pipeline. The problem is paying debt service until then. But it is also not clear how the cost can be fairly distributed among the districts. Once a pipeline is constructed, the water districts will have to build tributary lines of varying lengths and at varying costs in order to hook into the system.

## **Flood Control**

The Harris County Flood Control District is responsible for the construction and maintenance of projects that reduce flooding in the county. It designs flood control improvements, carries out capital improvement projects, maintains drainage facilities, approves subdivision drainage plans, and provides flood-watch and flood-alert programs. The district encompasses approximately 2,500 square miles, 22 major watersheds, and 3,000 miles of watercourses.



The current bayou and drainage systems, however, are not adequate in many areas to deal with a heavy rain event. Many areas in Harris County flood after short events leaving many homes under inches of water. With heavy residential and commercial development, drainage systems with greater capacity are needed.



Tropical Storm Allison, the first named system in the 2001 Atlantic hurricane season, battered the southeast Texas coast and Harris County with heavy rains and flooding during the week of June 5-9, 2001. The storm's leisurely crawl produced sweeping bands of showers that slowly moved up the Gulf Freeway. Rain gauges overflowed across the region, with many parts of Harris County recording rainfall amounts in the double digits. Heaviest hit was a spot along Greens Bayou in northeast Harris County, which

reported 36 inches of rainfall.

Damage estimates by Harris County Tax Assessor-Collector Paul Bettencourt and chief appraiser Jim Robinson were that the county suffered at least \$100 million worth of

damage to homes, properties, businesses and their contents. The Southwestern Insurance Information Institute estimated that damage from wind-driven rain, such as broken windows and punctured roofs, amounted to \$110 million alone. FEMA has reported a much higher figure, \$5 billion in damage from the storm and floods to homes, automobiles, properties, and businesses, making this the most expensive Tropical Storm in U.S. history.

## **Transportation and Roadway**

In addition to the development of water, wastewater and drainage systems, Harris County must also consider streets and sidewalks, traffic and transportation, and environmental issues in order to effectively and efficiently meet future development. Plans for streets and sidewalks must detail miles of streets and roads maintained as well as the percentages of commercial and residential use. The county engineer is responsible for all phases of engineering and construction for county facilities including roadways and traffic signals. Within each precinct, road crews work to maintain and improve the county's existing road network.

The region's continued economic vitality and quality of life is intrinsically linked to the performance of its transportation system. The 2025 Regional Transportation Plan, developed by the Houston-Galveston Area Council and their partners, proposes to enhance mobility by providing an efficient, affordable, safe, and environmentally responsible transportation system for both people and goods. The regional transportation system must keep pace with population and employment growth. This is a challenging imperative for a region that covers 7,705 square miles in eight counties with widely dispersed employment centers.

After a brief period of decreasing congestion in the early 1990s, travel time delays have steadily increased in the Houston-Galveston region. "Rush hour" now lasts for seven hours daily for the region's commuters. According to a recent study by the Texas Transportation Institute (TTI), the annual delay per traveler due to congestion was 56 hours in 2005, an increase of 24 hours over the last ten years. The Houston region wasted 42 gallons per traveler annually sitting in traffic. The annual cost of congestion in the region is \$2.225 million, the 2<sup>nd</sup> highest congestion costs in Texas and the 9th highest cost out of 14 "very large" urban areas (areas over 3 million) studied.

For over half a million residents of Harris County communities who reside outside of the Metropolitan Transit Authority of Harris County, Texas (METRO) service area, public transportation options are very limited. A lack of an efficient coordinated transportation system, which connects outlying areas of Harris County, particularly the Eastern sections of Harris County, to employment centers, has placed a high burden on low-income commuters due to high commuting times and high gas prices. Without a public transportation system, residents of these outlying communities must use their own vehicles and more of their income to travel to and from work.

In 2006, Harris County and HC Community & Economic Development Department undertook the development of the *Harris County Comprehensive Transit Strategy* with their consultant, The Goodman Corporation. The plan identifies area of transit needs, provides mobility options to underserved portion of the county and outside the METRO service area, enhances existing transportation services, and creates a strategy for implementation and funding. The net result of this plan is the creation of a “roadmap” for decision-makers at the regional, county, and municipal levels of government, as well as citizens, for the effective implementation of public transportation services and facilities over the next ten years. Potentially, by creating a countywide “brokerage” system to manage the various community level transportation services, it may be possible to reduce overall expenditures and meet existing and future service demands.

## **Assessment of Needs**

According to surveys and public meetings attended by citizens, local leaders and local organizations, the most pressing needs for infrastructure are in the areas of water/wastewater resources and treatment. In some cases, the purchased water is untreated. Therefore, when purchasing surface water, treatment of the water resource is also a relevant cost, suggesting that water treatment facilities will become a greater need in the future.

With so many areas in unincorporated areas of Harris County that lack basic neighborhood infrastructure such as water and sewer systems, rehabilitation of septic and water well systems is often needed in order to provide essential housing needs and to avoid environmental problems. CSD and its partner the Harris County Public Infrastructure Department will be holding workshops for local water districts and MUDs on topics such as maintenance schedules and budgeting, green-building, and fee structures for low-income areas.

The most significant result of subsidence is an increased amount of drainage problems, causing widespread flooding. Because of this irreversible condition, drainage improvements are needed in many areas of the county.

## **Goal and Measurable Objectives**

**INFRASTRUCTURE GOAL:** To ensure quality infrastructure in low-income communities, including improvement and provision of adequate streets, sidewalks, water systems, wastewater systems, and storm drainage sufficient to eliminate severe flooding problems.

**Objective 1: Street Improvements-**Construct and improve 15 miles of roadways benefiting low-income areas of the Harris County service area by February 28, 2012 for the purpose of improving the living environment and quality of life of 10,000 low-income persons.

**Objective 2: Water/Sewer Improvements**-Provide improvements to 50,000 linear feet of water/sewer lines and 4 water/sewer facilities benefiting low-income areas within the Harris County service area by February 28, 2012, for the purpose of improving the living environment and quality of life of 50,000 low-income persons. Improvements may include, but are not limited to sewage treatment facilities, rehabilitation of manholes, rehabilitation of water storage tanks, and construction and maintenance of lift and pump stations.

**Objective 3: Sidewalks/Pathways**-Construct and improve 3 miles of sidewalks/pathways benefiting low-income areas within the Harris County service area by February 28, 2012, for the purpose of improving the living environment and improving the quality of life for 5,000 low-income persons.

**Objective 4: Flood drain improvements**-Construct and improve 2 miles flood drains and controls benefiting low-income areas of the Harris County service area by February 28, 2012 for the purpose of improving the living environment and quality of life of 1,500 low-income persons.

## Public Services

According to the 2006 American Community Survey (ACS), the total population of Harris County is 3,886,207, the third largest county in the United States. Houston is the county seat, the largest city in Texas and the fourth largest city in the nation. Other cities include Pasadena, Baytown and several small cities. Harris County is home to a wealth of educational institutions, health care facilities, and companies that serve and employ area residents. Unfortunately, beneath the layer of prosperity lies poverty for some Harris County families. In 2006, 13.0 percent or 118,507 Harris County families were below the poverty line compared to 12.1 percent in 1999.

Harris County recognizes the broad spectrum of its resident's needs. Low-income residents face barriers in their everyday lives not encountered by their higher income constituency. In addressing this problem, Harris County shall utilize its general services to address any unique needs not covered in other areas of the Consolidated Plan. Harris County seeks to provide general public services to low-income persons to increase the quality of life and general well-being for individuals and families throughout the Harris County service area. General Services may include, but are not limited to, food and clothing distribution, housing counseling, and neighborhood clean-up.

## Special Needs Populations, Non-Homeless

### Seniors

According to the Texas Department of Health, 7.4 percent of Harris County residents are age sixty-five (65) or older. According to an American Association of Retired Persons (AARP) report entitled: "Back to Which Future: The U.S. Aging Crisis Revisited," by Sophie M. Korczyk, Ph.D. (December, 2002), more people are living longer after age 65 than in the past. The U.S. Census Bureau projects that the population over the age 65 will grow significantly between 2002 and 2030. According to the Harris County Area Agency on Aging Area Plan for 2008-2012, it is projected that by 2030, one out of every six persons (16.8%) will be at least 65 years old.

Table 5.20 Special Needs (Non-Homeless) Populations (Table 1B)

<b>SPECIAL NEEDS SUBPOPULATIONS</b>	<b>Priority Need Level</b> High, Medium, Low, No Such Need	<b>Unmet Need</b>	<b>Multi- Year Goals</b>
Elderly	H	4263	2,500
Frail Elderly			
Severe Mental Illness			
Developmentally Disabled			
Physically Disabled	H	1721	200
Persons w/ Alcohol/Other Drug			

Addictions			
Persons w/HIV/AIDS	H	3573	200
Victims of Domestic Violence			
Other			
<b>TOTAL</b>		9557	2,900

Source: Harris County CSD 2008-2012 Consolidated Plan

The Texas Department of Aging has published a comprehensive study related to seniors in Texas, entitled “The State of Our State on Aging,” December, 2002. The study found that between 1998 and 2002, an estimated thirteen percent 13 percent of elder Texans 65 and over had incomes at or below the poverty level, giving Texas the sixth highest poverty rate among 65 and older citizens. Texas has the largest number of people over 60; the second largest number of Hispanic elders; and the third largest older black population in the nation. It is estimated that minority elders shall constitute almost 40 percent of the states older adult population by 2020. Amongst the serious issues faced by Texas seniors, the study found that:

- Thirty-one percent of senior Texans have no prescription-drug coverage of any kind. A recent study of several states including Texas found that nearly a fourth of seniors were forced to skip doses due to money shortages.
- Grandparents are increasingly being requested to raise grandchildren. According to the 2006 (ACS) 44.6 percent of grandparents are responsible for their grandchildren under 18.
- Thirty percent 30 of elderly households pay more than thirty percent 32 percent of their income for shelter.

Many seniors residing in Harris County face a multitude of problems, such as housing; supportive services; transportation; educational, job training, and employment services; and recreation. According to table 5.20, Harris County has set out to plan for the future for the elderly by funding much needed social services such as food and clothing, housing, transportation services, healthcare/medication assistance, and many more much needed services. This text shall discuss each of these in varying detail.

### *Housing*

Some older residents of Harris County reside in housing that is substandard, not affordable, or lacks accessibility features needed to accommodate their disability. According to the Texas Department of Housing and Community Affairs (TDHCA) 2001 Community Needs Survey, almost 71 percent said the shortage of affordable housing for low-income older adults is a serious problem. According to the Texas Department of Housing and Community Affairs, the shortage of affordable housing for low-income older adults is a serious problem. Rising energy costs, poor home weatherization, and

increases in homeowner's insurance further aggravate Harris County's senior's ability to maintain decent, safe, affordable housing.

### *Supportive Services*

The State of Our State on Aging study notes that many older Texans require supportive services to maintain their independence and to age-in-place. According to the Harris County Area Agency on Aging, Long-term care and supportive services are costly. In Harris County, average costs of nursing facility care is \$3,500 per month. Unfortunately, many low-income seniors are unable to afford basic supportive services, such as in-home personal assistance. Government assistance tends to be very limited in this area, as basic services such as cleaning, shopping, and laundry simply are not covered by Medicare. Even when some supportive services may be provided for, seniors may still be hampered by long waiting lists to gain access. In addressing the needs of its senior citizens, Harris County has solicited the input of its seniors in formulating the Consolidated Plan. Harris County also encourages entities with a kindred purpose related to senior issues, to collaborate on issues and projects which benefit the senior community.

### *Transportation*

According to the Harris County Area Agency on Aging, transportation to access needed services continues to be one (1) of the top five (5) service priorities in Harris County. The State of Our State on Aging study found that a good seniors' transportation system is one which provides for safe driving as late in life as possible and offers convenient transportation options when driving is not feasible. The study also indicated that by the year 2024, one in four drivers will be over the age of 65. Older adults are among the population in danger of becoming those who do not own or cannot operate a vehicle and must rely on alternative means of transportation. Harris County supports the following recommendations of the study in regards to transportation, and hereby incorporates them into its Consolidated Plan: (1) Increase public awareness among consumers (seniors should be educated on how they can enhance their safety and mobility); (2) Improve coordination between entities (transportation coordination should be increased at the local level by involving private and public transportation entities).

### *Educational, Job Training, and Employment Services*

Seniors are increasingly being forced back into the workforce in order to maintain basic necessities of life. The high cost of prescription drugs, home utilities, car and home insurance, food, etc., are some of the factors driving this trend. As seniors seek to re-enter the work force, many find that they lack the requisite skills necessary to compete in an advanced economy. Even lower paying jobs such as store clerks, restaurant workers, etc., require some level of computer skills. As such, many seniors need additional job-specific training and/or education to keep abreast of technological changes, compete in the future labor market, and/or make career transitions. Harris County supports and incorporates into its Consolidated Plan the recommendation made in the Texas Department on Aging policy paper entitled Workforce and Older Americans (September, 2002) regarding education for seniors. The recommendations are: (1) Raise public awareness (Harris County seeks to partner with other public and private entities to raise awareness among seniors about employment services and job training opportunities



available in their communities); (2) Fund Special Services for Older Workers (Harris County seeks to fund special training and employment services for senior workers); and (3) Expand Coordination Between Entities (Harris County and area agencies which serve the needs of seniors should collaborate to develop an integrated, and effective workforce development system).

### *Recreation*

The study indicates that recreation affects the wellness of seniors, and plays a vital role in both life satisfaction and quality of life. Recreation may be defined as participation in hobbies or other activities of interest. Within that definition are two categories; active (physical activities such as baseball, basketball, volleyball, swimming aerobics, and jogging) and passive (sedentary activities such as reading, computer or board games, television, etc.). Studies indicate that sports, travel, and outdoor events tend to be most important to people aged 55-64, while involvement in community organizations, culture, arts, and travel are most important to people aged 65-74. Home-based activities and informal social activities are most important to people aged 75 and older. Nevertheless, the barriers to obtaining recreation services are numerous for seniors, including few financial resources, lack of transportation, high recreational fees, poor health, and inconvenient hours of operation. Harris County supports and incorporates into its Consolidated Plan the recommendation made in The State of Our State on Aging report. These recommendations include: (1) Increase public awareness of recreation options for older adults; (2) Increase collaboration with private and public agencies to reduce or waive fees for senior recreation activities; (3) Promote socially and ethnically diverse senior recreational activities; and (4) Increased funding for senior recreation. In furtherance of these goals, Harris County has partnered with several agencies in providing facilities and services to senior residents. Harris County also facilitates recreational programs, such as the Senior Drama Program, for its senior residents.

### *Persons with Disabilities*

According to the United States Census Bureau 2006 statistics there are 425,709 persons residing in Harris County with at least one disability or 12 percent of the population. Furthermore, there are approximately 225,168 people residing in Harris County that have two disabilities or more. There are 172,394 Harris County residents with a mental disability, and only 35,182 residents with a physical disability. There are a total of 423,700 total Harris County residents with a disability where poverty status has been determined, and conversely, only 262,804 Harris County residents with a disability are currently employed.

The Texas Governor's Committee on People with Disabilities has noted the following statistics regarding people with disabilities:

- The median monthly earnings of men and women between 21 and 64 years of age with a non-severe disability, respectively, are \$1,857 and \$1,200.
- The median monthly earnings of men and women between 21 and 64 years of age with a severe disability, respectively is \$1,262 and \$1,000.
- Fourteen percent of people in the active labor force have some type of disability.

- Three point five percent 3.5 of people in the active labor force with a severe disability.
- The percent of people aged 20 to 24 years with non-severe and severe disabilities, respectively, who are active in the labor force, is 79.6 percent and 37.2 percent.
- The percent of people aged 25 to 44 years with non-severe and severe disabilities, respectively, who are active in the labor force, is 84.2 percent and 36.4 percent.
- The percent of people aged 45 to 54 years with non-severe and severe disabilities, respectively, who are active in the labor force, is 87.6 percent and 31.6 percent respectively.
- The percent of people aged 55 to 64 years with non-severe and severe disabilities, respectively, who are active in the labor force, is 68.2 percent and 18.0 percent.

Harris County supports the following recommendations made by the Texas Governor's Committee on People with Disabilities to the Governor and Texas Legislature for 2002-2003 Biennium, and incorporates them into the Consolidated Plan:

1. Encourage the involvement of people with disabilities in the development and evaluation of communication devices and services.
2. Encourage the development of disability news services and other mechanisms to locate and access disability information.
3. Increase compliance with federal and state disability laws through improved monitoring and enforcement.
4. Provide technical assistance to reflect trends within the disability population.
5. Strengthen alliances among government, business, education, and rehabilitation to maximize employment opportunities for people with disabilities.
6. Develop innovative programs to improve awareness of employer/employee rights and responsibilities under the Americans with Disabilities Act.
7. Increase public awareness of the impact of medical advances for people with disabilities.
8. Promote the visibility of new publicly funded housing.
9. Promote the awareness of the benefits of universal design in housing.
10. Promote creative uses of state and federal housing funds to increase accessibility and affordability.
11. Encourage the placement of accessible technology for people with disabilities in libraries, retirement communities, senior centers, and other appropriate locations.
12. Promote the availability of accessible learning options such as distance education, computer based training, mentoring and training materials for software and adaptive equipment.
13. Maximize the use of transportation resources to provide accessible transportation for people with disabilities by providing training for passengers and improving coordination among providers.
14. Explore innovative use of federal and state transportation funding to increase available accessible public and private transportation options.
15. Promote public awareness of the need for accessible parking and its appropriate use.

### Persons living with AIDS

According to the City of Houston Quarterly HIV/AIDS Update, Texas ranks as 1 of 10 leading states reporting the highest number of cumulative AIDS cases as of June 2007. According to the AIDS Foundation Houston, one in ninety Houstonians is HIV positive. According to the Texas Department of Health, Bureau of HIV & STD Prevention entitled “HIV/STD Annual Report 2005,” as of December 31, 2005, 67,823 AIDS cases had been reported in Texas since the start of the epidemic in the early 1980s. At least 35,207 of these people are deceased (a cumulative case-fatality rate of 51.9% for Texas). In 2005, 3,224 new AIDS cases were reported in Texas for an overall AIDS rate of 14 cases per 100,000 people, down from 14.3 in 2004. For Texas males, the AIDS rate, 21.7/100,000, remained much higher than the female AIDS rate, 6.3/100,000, but both were lower than the 2004 rates. People with AIDS are living longer and people with HIV are getting earlier treatment.

Significant differences are found in the rate of reported AIDS cases among different ethnic, age, and gender groups. The report indicates that the rate of AIDS cases among African Americans was more than 4 times higher than rates for whites or Hispanics. Among females, the rate was 7.4 cases per 100,000 of the population. However, the rate of infection for African American female population was significantly higher at 38.1 cases per 100,000. Nationally, the age range 40-44 had the most estimated number of AIDS cases in 2006 with 8,210 cases. Perhaps even more surprising, the age range 20-29 was very low, where in the early 2000s this was not the case. By far the largest number of AIDS cases reported in 2005 was the Houston area with 19.5 cases per 100,000 people.

Harris County supports and incorporates the three components of the Texas Department of Health’s HIV Prevention program, including Health Education and Risk Education (HERR), Prevention Counseling and Partner Elicitation (PCPE), and Public Information. Health Education and Risk Reduction seeks to prevent the spread of HIV by educating high risk persons about disease transmission, assisting them in establishing realistic, personalized risk reduction plans and providing them with the skills needed to remain HIV free. In meeting this goal, public and private agencies target specific populations with HIV health education intervention in places such as parks, jails, community hangouts, schools, local health clinics, and sexually transmitted disease waiting rooms. Prevention counseling and partner elicitation is a client centered, interactive response to individual client needs. The goal of prevention counseling is to develop prevention goals and strategies with the client rather than simply providing information. Counselors understand the unique circumstances of each client, and provide pre-test and post-test HIV counseling. Pre-test counseling assesses the client readiness to take an HIV test, while post-test counseling reinforces behavioral changes to maintain personal health and preventing infection, or seeking appropriate medical and psychological support in the event the HIV test is positive. The public information portion of the HIV prevention program contemplates public and private agencies providing important information regarding HIV transmission, prevention, rates, etc.

## Youth Services

According to the 2006 American Community Survey (ACS), 31 percent of Harris County residents are under the age of 19. Unfortunately, that figure may be correlated with the Texas Youth Commission statistics, which found that Harris County had the highest number of youth offender commitments in the state from 2002-2006, with 630 commitments. Youth are perhaps the most important asset of Harris County. With increasing rates of juvenile crime and commitments, Harris County seeks to prevent youth from falling into delinquent lifestyles. The American Youth Policy Forum report entitled “Less Hype, More Help: Reducing Juvenile Crime, What Works—And What Doesn’t,” finds that two characteristic traits of youth who fall into delinquent lifestyles are lack of attachment to caring adults, and lack of involvement in school and other positive pro-social activities in their communities such as an after-school program, a job, church, or community service. Unfortunately, “disconnected” youth are found to comprise the majority of the delinquent population.

While local juvenile justice and community development agencies often lack a collaborative framework with which to assist youth, Harris County has been pro-active in forming such partnerships. Harris County has sought to strengthen partnerships with residents, community-based organizations, and partner agencies.

**Domestic Relations:** The Office of Domestic Relations provides services to establish and enforce court orders for the support of and/or visitation rights to a child. The office also provides information to assist parties in understanding and complying with court orders pertaining to child support and rights of visitation.

**Juvenile Probation:** The Juvenile Probation Department provides support and assistance to the district courts for juvenile offenders who come within authority of the Family Code. Responsibilities include screening of all juveniles referred to the department, provision for court-mandated services and placements, and operation of institutions and programs for youths in custody.

**Juvenile Justice Alternative Education Program:** The Juvenile Justice Alternative Education Program is administered through the Harris County Juvenile Board. The program is mandated by Chapter 37 of the Texas Education Code and provides education for certain expelled and adjudicated youth based on standards of academic accountability and performance as approved by the Texas Juvenile Probation Commission. For each student, the school district in which the student was enrolled must transfer to the Juvenile Board funds equal to the district’s average student expenditure for alternative education programs.

**Harris County Protective Services for Children and Adults (HCPS):** Responsibilities of this program include accepting all child abuse and neglect referrals, working with families toward the goal of resolving family problems and preventing the removal of children from the home, placing a child in appropriate substitute care or adoption when

necessary, providing casework services to status offenders and children in need of supervision, and providing children in agency custody with adequate medical care. The Guardianship Program is also a division of Children/Adult Protective Services (HCPS). The Guardianship Program appropriately manages the affairs of an adult person, who is incapacitated, and to promote and protect the well-being of the person.

Children's Assessment Center: The mission of the Children's Assessment Center is to protect children by providing on-site agency cooperation and use of a multi-disciplinary team approach in prevention, investigation, assessment, referral for prosecution, and treatment of child sexual abuse.

Other community based programs offered in Harris County include Aldine Youth Program, Precinct One Discovery Camp, the Katy Hockley Boot Camp, the Northeast Adolescent Program, and the East Harris County Youth Program.

Harris County supports and incorporates into its Consolidated Plan the following recommendations made in the American Youth Policy Forum report regarding reducing juvenile crime:

- Provide research-proven treatment and services for young children with behavioral problems and their families.
- Deliver community-based, family –focused treatment for delinquent youth who pose no risk to the community.
- Coordinate services among agencies- juvenile justice, education, mental health and child welfare- that share responsibility for troubled youth.
- Recruit local volunteers and engage community-based organizations to work directly with high-risk and delinquent youth.
- Develop alternative programs like drug courts, teen courts, family group conferencing, and victim offender mediation to hold young offenders accountable while connecting them to positive resources in the community.
- Support intensive early childhood intervention programs to promote the healthy development of infants and toddlers in high-risk families.
- Mobilize the community to plan and implement comprehensive youth crime prevention strategies that involve families, schools, and neighborhoods.

#### Childcare

According to the 2000 Census Bureau, in 1999 15.11 percent of Harris County residents were below the poverty level compared to 16.44 percent in 2006. The age group with the greatest percentage of residents below the poverty level is children under the age of 18 at 19.97 percent compared to 23.5 percent in 2006. The age group with the second highest poverty level percentage is the 18 to 64 years at 13.21 percent compared to a slightly higher 13.77 percent in 2006. The Center indicates that Texas has increased its investment in early education by 37 percent by expanding pre-kindergarten, providing additional funds for full-day programming, and implementing a new Head Start supplement. Funding for home visits in Texas to high-risk families has also increased.

As of 2006, the State of Texas reported 32,490 childcare facilities in Houston/Harris County. These facilities were licensed, registered, or listed with the Texas Department of Protective Services, Child Care Licensing. The Children's Defense Fund included Texas in its August, 2002 report entitled "One-third of a Nation's Future: Children in the South." The report indicates that limited childcare funding holds back many low-income working families. Because many families in places such as Texas tend to earn lower wages compared to the nation as a whole, they have a particular need for assistance to pay for childcare. Nevertheless, they are the least likely to receive it, as the waiting lists for subsidized childcare have swollen.

The White House childhood policy, "No Child Left Behind Act," is working states President Bush. "Scores are improving, in some instances hitting all-time highs." In addition, The Children's Defense Fund (CDF) provides a strong voice for all the children of America who cannot vote, lobby, or speak for themselves. We pay particular attention to the needs of poor and minority children and those with disabilities. The CDF encourages preventive investment for children since 1973. Childcare affects the way that children think, learn, and behave, and can have a long-term impact on a child's life.

The report indicates that the average annual cost for center-based childcare for a 4-year-old urban area is \$5,613 in 2005. Utilizing these statistics, it may be inferred that many low-income families in Harris County are unable to afford childcare. Illustrating this, the report indicates that only one out of four low-income children eligible for childcare assistance under federal law receives it. In Texas, the waiting list for subsidized childcare was 15,231 in early 2007. Compound these statistics with the fact that because of very low reimbursement rates for subsidized childcare, many families find that they are still denied access to high quality care. Child care providers may not be able to provide adequate services at the reduced rates, may be required to add costly improvements to their facilities, or ask parents to make up the difference between what the state pays and what the provider charges for care, placing an additional burden on already stretched family budget.

In addressing the issue of childcare in its jurisdiction, Harris County seeks to:

- Ensure safe and healthy care for infants and toddlers: This is accomplished by promoting policies and regulations regarding childcare in Harris County.
- Improve the supply of quality infant and toddler care. Harris County seeks to encourage the development of additional childcare resources through funding and collaborating with public and private childcare agencies which share its kindred purpose.
- Support families with very young children. Harris County recognizes the needs that low-income families with very young children experience in regards to childcare, and seeks to support programs which serve their needs.

## **Abused and Neglected Children**

According to the Texas Department of Family and Protective Services (DFPS) 2007 Quarterly Report, there were 13,329 children being investigated for either physical abuse,

39 percent, sexual abuse 17 percent, and neglect and other types of abuse 45 percent. Victims of serious physical abuse or neglect are investigated through a central unit known as the Child Protection Point of Entry, which coordinates investigations, assessments, safety services, treatment and prosecution.

Victims of sexual abuse in Harris County are referred to the Children's Assessment Center for investigation. At the Center, CPS staff, law enforcement, a medical clinic, and specialized interviewers and therapists provide clinical services and work together with professionals from ten partner agencies on-site to provide high quality comprehensive assessments and services to children and their families. According to the Center, approximately 94,570 boys and 150,801 girls have been or will be sexually molested before the age of 18, or 26% of children from all socioeconomic and ethnic groups of Harris County. The Texas Department of Criminal Justice has stated that 22.7 percent of sex offenders in Texas are under supervision and control of the Parole Division reside in Harris County.

The following programs are operated through Harris County Protective Services for Children and Adults (HCPS):

- *Texas Department of Family and Protective Services – Point of Entry (POE)*  
The Youth Services Center will serve as the point of entry facility for the state-managed Child Protective Services program. CPS staff will be on site 24 hours per day, 7 days a week to provide intake/assessment services for abused and neglected youth, to handle abuse and neglect calls and to investigate reports of suspected abuse and neglect.
- *TRIAD Prevention Program – Intake/Diversion Program*  
Harris County Protective Services for Children and Adults (HCPS), the Harris County Juvenile Probation Department and the Mental Health/Mental Retardation Authority coordinate their resources to serve at-risk youth through the TRIAD Prevention Program.
- *Community Youth Services - CYS*  
CYS is a crisis intervention and case management program of HCPS that offers free, voluntary assistance to at-risk children, youth and their families who are experiencing individual and family problems. CYS partners with local school districts to offer confidential, free services to students.
- *Community Unit Probation Services (CUPS) Unit Zero*  
CUPS staff will provide a range of services for younger juveniles with Class B misdemeanor offenses who have received Deferred Prosecution from the Courts.
- *Medical/Dental Clinic*  
In addition to helping CPS caseworkers identify suspected child abuse and neglect, the clinic provides medical care to all child clients of CPS. It is staffed by a

contracted dentist and doctors. The clinic offers Infant, Child & Adult CPR, First Aid and AED training.

- *DePelchin Children's Center Unit*  
A 2-person unit from DePelchin Children's Center will be on site to provide counseling for shelter residents and other youth and families served through HCPS.
- *Preparation for Adult Living Program (PAL)*  
This program helps make the transition to adulthood less problematic for youth in foster care.
- *Training Institute*  
A Training Center consisting of several state-of-the-art conference rooms on the second floor of the facility will be used for various youth groups, staff training sessions, administrative meetings and other County needs.
- *Emergency Shelter*  
The Youth Services Center will be home to the County's 24-bed Emergency Shelter for the abused and neglected youth ages 12-17 for up to 90 days.
- *Shelter School and Library*  
Resident youth are required to attend the shelter's own full-time, tear round school. Fully accredited HISD teachers focus on tutoring the youth in subject areas.
- *Youth Recreational Areas*  
Shelter residents will be able to enjoy a large recreational area within the shelter, as well as the patio for outdoor meals and events.

Harris County seeks to provide services to 1,000 abused and neglected children by July 31, 2012 for the purpose of enabling a secure and stable environment thus increasing quality of life. Services include but are not limited to advocacy, counseling, childcare, and protection.

## Health Services

### County Health Characteristics

#### *Births*

Table 5.21 Harris County Births, 2004

	Number Births (by County of Residence)	County	State
Total Live Births	67,131		381,441
Adolescent Mothers (<18)	2,920	4.3%	5.0%
Unmarried Mothers	24,710	36.8%	36.0%
Low Birth Weight	5,573	8.2%	8.0%

Source: Texas Department of State Health Services



The Texas Department of State Health Services (TDSHS) reports that in 2004, 80 percent of Harris County women received prenatal care during the first trimester, which is down from 81 percent in 2003. Infant mortality is one of the most important indicators of community health, according to TDsHS. In 2004 there were 436 deaths among infants under age one in Harris County, a rate of 6.6 deaths per 1,000 births. Reflecting national trends, the 2004 infant mortality rate among African-Americans in Harris County was 13 deaths per 1,000 births, compared with a rate of 4.8 deaths per 1,000 births among whites and 5.7 deaths per 1,000 births among Hispanic populations.

According to TDSHS, birth weight under 5.5 lbs is considered low birth weight (LBW), and under 3.5 lbs is considered very low birth weight (VLBW). Low birth weight is a significant determining factor in infant deaths, and can lead to developmental disorders such as cerebral palsy, mental retardation and vision and hearing loss. Commonly attributed to maternal behavioral factors such as nutrition, low birth weight can be prevented if risks are identified during pregnancy. TDSHS data report that 5,513 Harris County infants born in 2003 were LBW or VLBW, a rate of 80 low or very low birth weight infants per 1,000 births (Refer to Table 5-18). This rate is similar to that of infants born in Texas and the United States. Of low birth weight infants born in Harris County, 19% were VLBW.

The Advisory Committee on Immunization Practices and the American Academy of Family Physicians recommend a schedule of vaccines that all children should receive by a certain age. According to the CDC's 2005 National Immunization Survey (NIS), an estimated 76.6 percent of Houston/Harris County children were appropriately immunized at age two with the all four series of vaccines. These numbers are up from the 63 percent in 2001. It is imperative that the fourth dose of diphtheria, pertussis, and tetanus (DPT) be given to boost immunity, as the protection provided by the third dose decreases after about six months. The last dose and other series given at that period seem to be the hardest for providers and parents to achieve. Failure to do this brings down immunization rates considerably. Failure to address gaps in the series and to vaccinate at an early age endangers children, as they are vulnerable to outbreaks.

### *Communicable Diseases*

Table 5.22 Reported Cases of Communicable Disease, 2000 and 2003

Diseases	2000			2003		
	Rate per 100,000			Rate per 100,000		
	Cases	County	State	Cases	County	State
Tuberculosis	403	11.9	7.2	425	11.8	7.5
Sexually Transmitted Diseases						
Syphilis	70	2.1	1.9	193	5.4	2.9
Gonorrhea	5,917	174.0	157.8	4,257	118.5	110.0
Chlamydia	12,218	359.3	329.7	10,598	295.1	309.9

AIDS	725	21.3	13.4	1,397	38.9	16.7
Chickenpox	1,802	53.0	33.6	1,956	26.6	24.6

*Source: Texas Department of State Health Services, Center for Health Statistics, 2006*

In 2000 and 2003, the rate of reported communicable diseases, discussed in the table above, has been higher for the County than the state. This may be due to the high density of urban Harris County. Between 2000 and 2003, the numbers of reported gonorrhea and Chlamydia cases have been on the rise. Gonorrheal conjunctivitis was once a prominent cause of blindness in the newborn, the infection being transmitted from an infected birth canal in the mother. Chlamydia is a major cause of nongonococcal urethritis in men and pelvic inflammatory disease and ectopic pregnancy in women. Although the number of reported cases of HIV/AIDS has rose, HIV prevalence has remained high.

#### *Deaths*

According to Harris County Public Health & Environmental Services 2006 Annual Report, a total of 20,193 Texas residents died in 2004 (Refer to Table 5-20). The leading cause of death was diseases of the heart which accounted for 5,167 of those deaths, while the second most common cause of death was malignant neoplasm's (cancer), which accounted for 4,526 deaths. Strokes, accidents, and chronic lower respiratory diseases, ranked third, fourth, and fifth, respectively. Together, these five leading causes of death represented more than half of all deaths in Harris County in 2004. Harris County experienced a slightly higher rate of death than the state in 2004. This was also true by category, cardiovascular disease, cancer, and homicide rates were each reported at rates higher in the county than the state.

Table 5.23: Leading Causes of Mortality, Harris County, 2004

Leading Causes of Mortality, Harris County, 2004		
Cause of Death	Total Deaths	Age-Adjusted Mortality Rate
All Causes	20,193	823.4
Heart Disease	5,167	225.2
Cancer	4,526	183.0
Stroke	1,330	60.8
Accidents	1,146	35.3
Chronic Lower Respiratory Disease	744	34.1
Diabetes	628	25.7
Alzheimer's Disease	398	20.1
Septicemia	454	19.1
Kidney Disease	422	18.2
Influenza and Pneumonia	362	16.8
Suicide	364	10.7
Chronic Liver Disease and Cirrhosis	310	10.3
Homicide	366	9.4
HIV/AIDS	290	8.0

Source: Texas Department of State Health Services, Center for Health Statistics, 2006

## Transportation

Harris County continues to experience significant growth. However, with growth comes additional strains on an already burdened transportation system. Though Harris County does have a public transportation system, primarily in the form of Metropolitan Transit Authority (METRO) buses, many people who are unable to afford a vehicle find mobility within the County extremely difficult. According to the 2006 Harris County Comprehensive Transit Strategy Report, found that many low-income residents of Harris County must utilize the public transportation for daily mobility. Among individuals with lower incomes, transportation options often diminish. Personal vehicles may not be available at all, may be available only for one of two potential wage earners, or may be unreliable. Individuals may get to work or other destinations through carpools or from rides from friends. However, other individuals without a reliable personal automobile in an area lacking public transit will be unable to get to work and will have limited mobility options. Public transit can provide access to jobs, medical services, schools, social services, and shopping, among others, and is a practical option for such individuals.

According to the report, there are several large communities in Harris County earning incomes of less than \$30,000 per year. Households with this level of income are more likely to use public transit (although their ability to pay for fares may be limited), since affording the upkeep of more than one personal vehicle is difficult. Income levels do not preclude a household from possessing considerable financial assets, especially if there is

a large presence of elderly/retired individuals that may already own their home outright, but have a fixed retirement income and limited mobility options. In addition, several fairly large communities within non-METRO Harris County have relatively high percentages of household without automobiles, including Galena Park, 8.25 percent, Pasadena, 7.75 percent, and Baytown, 6.5 percent.

Some of the conclusions made by the report regarding the areas transportation system include:

- An average household in the region has 2.67 persons, 1.29 employed persons, 1.7 persons with a drivers license, 1.8 vehicles available, an annual income of \$48,000 and generates over 9 trips per day.
- Households within the region generate over 14 million trips per day during the week, resulting in over 88 million vehicle miles of travel each day. This represents about 83 percent of the daily vehicle miles of travel that occurs within the region.
- The mobility provided by the transportation system has improved. Non-work trips have increased in terms of average trip length but average speeds have improved by nearly 9 percent.
- The number of commercial vehicles operating in the region on a daily basis is 150,000. These vehicles generate 972,000 vehicle trips and 10.7 million vehicle miles of travel each day. More than half of the commercial vehicle trips were for delivery purposes, but 17 percent of the vehicle trips were reported as carrying no cargo.
- There are 237,000 vehicles that enter or leave the region each day, nearly 16 percent of these are commercial vehicles. The vehicle miles of travel within the region produced by vehicles that begin or end their trip outside the region is 8.7 million.
- Nearly 232,000 daily trips are made on public transportation systems during the week. Transit users come from households that are much larger in size (3.6 persons) than the region as a whole. Their annual household income is half that of the region's average and they have on average less than one vehicle available to the household for travel.
- Home based work trips account for 55 percent of transit trips; however, represent only 19 percent of all travel.

In its report entitled "Goals for Tomorrow: A Comprehensive Planning Framework for the Houston-Galveston Area Council," finds that population growth in the area will require major transportation investments to maintain an acceptable level of mobility for residents and provide for efficient goods movement. Harris County supports and incorporates into its Consolidated Plan, the following goals for the areas transportation system:

- Efficient movement of people and goods.
- An environmentally responsible system.
- Active citizen involvement.

- A cost effective and affordable transportation system.

## Goal and Measurable Objectives

**PUBLIC SERVICES GOAL:** To provide direct social services that improve the quality of life of extremely low, low and moderate income persons, including accessibility to information and educational opportunities from preschool to adult education, provision of a safe and comfortable educational environment, provision of general welfare services including food and clothing, accessibility to quality health care for seniors and youth, development of educational programs and youth enrichment programs, promotion of programs benefiting abused and neglected children, support of indigent bereavement services, and accessibility to social, medical and employment services.

**Objective 1: General Services** – To provide general public services to 5,000 low and moderate persons to increase quality of life and general well-being for individuals and families throughout the HCCSD service area. Services include but are not limited to food and clothing distribution, housing, counseling, crime awareness, and neighborhood clean up.

**Objective 2: Senior Services (Special Needs Population)** – To provide senior services to 2,500 elderly and frail elderly persons to enable them to increase or maintain quality of life and promote physical, mental, and social well-being. Senior services include but are not limited to food and clothing distribution, housing counseling, transportation services, enrichment classes, exercise and recreation programs, healthcare/medication assistance, emergency dental care and services for Alzheimer’s disease patients and their families.

**Objective 3: Youth Services/Child Care** – To provide youth services/child care for 12,000 low- income persons, 5-19 years of age, for the purpose of enriching, protecting, and improving quality of life by February 28, 2012. Youth services include but are not limited to counseling, after-school programs, sports and recreational programs, education and tutoring programs, life skills buildings, self-esteem building, drug and alcohol education, youth retreats, mentor programs, summer youth programs, child care services, juvenile crime/gang programs, and job and career counseling.

**Objective 4: Health Services** – To provide health prevention, services, and outreach to 2,500 low and moderate income persons to increase the mental, physical, and social well-being of the individual and family by February 28, 2012. Health prevention, services, and outreach include but are not limited to immunization, health clinic service, mobile care, vision care, dental care, nutrition counseling, tele-medicine, after hours care, physical rehabilitation, services to person with HIV/AIDS, and health education and awareness.

**Objective 5: Services to Persons with Disabilities and persons with HIV/AIDS (Special Needs Populations)** – To provide services to 200 disabled adults or persons with HIV/AIDS to enable them to increase or maintain their quality of life and promote physical, mental, and social well-being. Services include but are not limited to

counseling, housing placement, food and clothing distribution, transportation services, enrichment classes, exercise and recreation programs, job training and placement and independent living skills training.

**Objective 6: Transportation Services** – To promote transportation services to 500 low-income persons by February 28, 2012 to increase mobility to access essential service, facilities, jobs and employment centers thus improving the quality of life.

**Objective 8: Abused and Neglected Children**-To provide services to 1,000 abused and neglected children by July 31, 2012 for the purpose of enabling a secure and stable environment thus increasing quality of life. Services include but are not limited to advocacy, counseling, childcare, and protection.

## Public Safety

Violent crime rates have declined since 1994, reaching the lowest level ever recorded by the National Crime Victimization Survey in 2005. Males were more likely to be violently victimized by a stranger, and females were more likely to be violently victimized by a friend, an acquaintance, or an intimate. Nationwide, during 2005:

- About seven in ten rape or sexual assault victims stated the offender was an intimate, other relative, a friend or an acquaintance.
- Seventy-four percent of males and 48 percent of females stated the individual(s) who robbed them was a stranger.

Violence against men and women by friends/acquaintances and strangers and intimate partner violence against females fell significantly between 1993 and 1998. Family members were most likely to murder a young child -- About two out of three child murders were committed by a family member. Intimates were identified by the victims of workplace violence as the perpetrator in about 1% of all workplace violent crime. About 40% of the victims of nonfatal violence in the workplace reported that they knew their offender. For murder victims, 43% were related to or acquainted with their assailants; 14% of victims were murdered by strangers, while almost 43% of victims had an unknown relationship to their murderer.

Between 1999 and 2002, students age 12 through 18 were victims of about 186,000 serious violent crimes at school, and about 476,000 away from school. Between 1992 and 1999 victimization rates at school and away from school declined.

- Between 1992 and 2003, crime in the Nation's schools for age 12-18 fell, a pattern consistent with the decline in the national crime rate.
- In every year from 1999-2002, students age 12-18 were more likely to experience a serious violent crime away from school than at school.
- Among high school students in grades 9-12, the percent who said they got into a fight on school property declined from 16%-13% between 1993-2003.
- In 2003, 12% of male students and 6% of female students reported experiencing a threat or injury at school.

Table 5.24 Violent and Property Crimes Reported in Harris County

Year	Murder	Rape	Robbery	Aggravated Assault	Larceny-Theft	Burglary	Auto Theft
2000	50	303	1,081	3,158	19,460	7,903	3,946
2004	56	370	1,899	4,670	25,694	9,941	4,689

Source: 2000 Crime Stats: U.S. Department of Justice, Bureau of Justice Statistics, 2003

2004 Crime Stats: Texas Department of Public Safety; Crime in Texas, 2004

From 2000 to 2004 aggregate crime statistics have slowly risen in every single crime related category (refer to Table 5.18), and this is due to several factors including; population growth, more illegal immigrants, Katrina evacuees, and the probation system letting probationers off early. According to the 2006 Census, the population of Harris County has grown by more than 300,000 in the last six years, and conversely more people means more crime. According to the Texas Senate Criminal Justice Committee Interim Report, another significant problem is people who receive community supervision as a result of the crimes that they committed are now getting off before the scheduled release dates. The report states, “The committee found that Harris County’s community supervision caseload declined 22.4% over the past decade. Problem is, the committee reports, statewide about 46% of probation cases end with reaction and incarceration.” This means that these probationers end up incarcerated or the revoking of their probation much of the time, which ultimately creates more crime in Harris County.

Table 5.25 Charge Categories for Crimes in Harris County

Misdemeanor	Number	%	Felony	Number	%
Assault	5,068	10.2%	Murder/Mansl/Homicide	187	0.6%
DWI	8,915	17.9%	Assault/Att or Sol Murder/Injury Offense	3,310	10.6%
Theft/Burglary Offense	6,929	13.9%	Sexual Assault Adult	117	0.4%
Trespass	3,121	6.3%	Sex Offense Child (Sex Aslt, Indec, Incest)	775	2.5%
Evade Arrest or Detention/Fleeing	1,491	3.0%	Robbery	1,362	4.3%
Resist Arrest	537	1.1%	Other Personal Offense	641	2.0%
Weapon Offense	1,459	2.9%	Burglary Building/Habitation/Other	1,743	5.6%
Criminal Mischief	897	1.8%	Theft Offenses	2,601	8.3%
Sex Offense	1,434	2.9%	UUMV	1,182	3.8%
DWLS/Other Traffic	8,595	17.3%	Other Property Offense	2,029	6.5%
Failure to ID to PO	1,642	3.3%	Drug Sale/Manufacture	2,870	9.2%
Other	1,677	3.4%	Drug Possession	10,909	34.8%
			DWI	891	2.8%
			Other	2,728	8.7%
Total	49,771	100%	Total		100%

Source: Harris County Annual Report Study for Pretrial Services, 2005



## Economic Development

The population of Texas and Harris County has increased rapidly, exceeding that in a nation in every decade since it became a state. The trends suggest that the effects of a diversifying, growing, and aging population will have a clear implication for the Texas economy in the coming decades. These trends signal a greater need for effective public education, job training initiatives, and small business and micro-enterprise development, particularly for current minority groups. In the absence of these changes in the socioeconomic resources, estimates show reduced levels of education, reduced incomes, increased levels of poverty, and related increased rates of use of a variety of state services.

### The Harris County Economy

The immense physical size and large population of Harris County makes economic development planning a formidable task. Historically, oil has been the lifeblood of the local economy accounting for as much as 90 percent of our economic base. The oil bust of the 1980's made it clear that we must promote economic diversity in the county to ensure the economic well being of our citizens. The recent strong growth of the service sector, jobs in business management, accounting, janitorial service and the like, appeared to provide a solution. Today, the employment structure has diversified in ways that leave its economy no more similar to the nation's than it was in 1980. Rapid growth at NASA and the Texas Medical Center has been tied to a network of professionals in engineering, computer science and technical administration.

Three factors have shaped the local economy: the U.S. economy, energy prices and the strength of the dollar. Sudden increases in crude oil and natural gas prices in 1999 and 2000 bolstered the economy, but a weak national recession coupled with continued strengthening of the dollar and declining energy prices in 2001 reduced job growth to zero by early 2002. In 2003 and 2004, all three factors progressed consistently in the Harris County/Houston region's favor, and employment growth resumed in 2004, accelerating to 3.6 percent in 2005 and 4.0 percent in 2006.

#### Local Economy

In many regards, the economy of Harris County mirrors that of the country overall; the percentage of Harris County workers employed in any particular industry does not differ by more than 3 percent from national averages. Harris County enjoys a relatively diverse economy, with no single industry accounting for more than a quarter of employment. In

#### Overview

- Three factors have shaped the local economy: U.S. Economy, energy prices and the strength of the dollar.
- In 2005, Harris County's unemployment rate of 6.6 % was 1.1 % higher than the national average.
- From 1990 through 2005, the size of Harris County labor force experienced robust growth, increased by more than 20% from 1.49 million in 1990 to 1.80 in 2005.
- NASA, the Texas Medical Center, Major universities and the largest energy and petrochemical companies make Houston/Harris County a focal point of U.S. research and development activities.

an effort to insulate the city from future economic downturns, however, more diversification of the economy may be necessary. Harris County has a disproportionate amount of natural resources and construction workers. As a result, a future slump in energy commodities or the housing market could prove difficult for Harris County.

Table 5.26 Employment by Industry –Houston/Harris County MSA 2006 (Average)

<b>Industry</b>	<b>Number of Jobs*</b>	<b>Percent of Jobs</b>
<b><i>Industry Goods Producing</i></b>	<b>481.1</b>	<b>19.67</b>
Mining (Crude/Natural Gas/Support Activities)	77.1	3.15
Construction	181.2	7.41
Manufacturing	222.8	9.11
<b><i>Services Producing</i></b>	<b>1,964.9</b>	<b>80.33</b>
Transportation and Warehousing	105.4	4.31
Utilities	14.3	.58
Information	35.9	1.47
Retail Trade	252.5	10.32
Wholesale Trade	129.2	5.28
Finance and Insurance	91.3	3.73
Real Estate and Rental and Leasing	49.0	2.00
Professional and Business Services	356.1	14.56
Educational Services	42.5	1.74
Health Care and Social Assistance	229.0	9.36
Arts, Entertainment, Recreation	26.1	1.07
Hotel and Food Services	192.1	7.85
Other Services	94.1	3.85
Government	347.5	14.21
<b>TOTAL</b>	<b>2,446.0</b>	<b>100.00</b>

Source: Texas Workforce Commission, 2006

Note: \* Jobs per 100,000

Houston/Harris County MSA annual average non-farm payroll employment in 2006 rose by 97,400, or 4.1 percent to 2,446,000. Unemployment in the area averaged 5.0 percent (2006). Employment in upstream energy sectors declined from 68.7 percent of the economic base in 1981 to 32.6 percent in 2006, while jobs in energy-independent sectors rose from 15.7 percent of the base in 1981 to 51.6 percent in 2006, according to the University of Houston Institute for Regional Forecasting. During 1986-2006, the energy-independent portion of the base grew at a compound annual rate of 6.4 percent.

An extensive transportation network links Harris County to regional, national and global markets and economies. The Houston Ship Channel allows deep-water vessels to travel inland from Galveston Bay and the Gulf of Mexico to within miles of the Houston, Jacinto City, and Galena Park central business districts. The Port of Houston is a 25-mile-long complex of diversified public and private facilities located just a few hours sailing time from the Gulf of Mexico. The Port is the third largest port in United States and the

eighth largest in the world. This factor enhances Harris County's image as a prime distribution location and as a center for international trade and commerce.

#### Corporate Economy

Houston/Harris County, ranks fourth among U.S. metro areas in number of corporate headquarters for *Fortune 500* companies. Eight 2002 *Fortune 100* Fastest Growing Companies are headquartered in Harris County. Of the world's 100 largest non-U.S. based corporations, at least 49 have non-retail operations in Houston/Harris County. *County Business Patterns* shows that Houston/Harris County in 2000 had 107,176 businesses established with payroll.

Table 5.27 Largest Houston Area Private Employers – 2006

<b>Employers</b>	<b>Employees</b>
Memorial Hermann Healthcare System	19,000
Continental Airlines	16,000
Shell Oil Company	13,000
Kroger Company	12,000
ARAMARK Corp.	10,000
Halliburton KBR	10,000
Methodist Health Care System	9,991
Baylor College of Medicine	9,143
Hewlett-Packard	9,000
BP America	8,000
Pappas Restaurants, Inc.	8,000
HCA	7,855
Lyondell Chemical Company	7,435
Baker Hughes Incorporated	7,000
Macy's	7,000

Source: *Business Houston 2002*

Houston/Harris County consistently ranks among the top five U.S. cities in the number of foreign consulates. It is the base of operations for the international oil/gas exploration and production industry. The Greater Houston Partnership estimates that foreign-owned firms and domestic firms with major international operations directly or indirectly supported nearly 38 percent of Houston/Harris County jobs in 2001.

#### Local Industry

The Houston/Harris County region has a generous amount of supplies of minerals, timber, industrial soil, seawater, and fresh water. Oil and gas provide hydrocarbons for refineries and petrochemical plants. Much of the nation's sulfur is produced along the Texas Gulf Coast. According to the Perryman Group, manufacturing in 2001 accounted for 11.7 percent of the Houston/Harris County Gross Area Product. Non-durable goods represented 59.2 percent of the manufacturing total.

### *Oil and Gas*

Houston/Harris County is the leading domestic and international center for practically every segment of the oil and gas industry – exploration, production, transmission, marketing, service, supply, offshore drilling and technology. In February 2007, the Houston/Harris County MSA held 29.5 percent of the nation's jobs in oil and gas extraction (42,500 of 144,200) and 13.8 percent of jobs in support activities for mining (37,700 of 273,700). Thirty-eight of the nation's 138 publicly traded oil gas exploration and production firms, including 10 of the 25 largest as ranked by 2005 total assets, are headquartered in Houston; eight more among the top 25 have subsidiaries, major divisions or other significant operations here (GHP's Houston Facts, 2007).

### *Residential Construction*

According to the Houston Association of Realtors, MLS closing in the region totaled a record 87,435 in 2006, up 10.7 percent from 2005. Median sales price for resale single-family detached homes was \$149,610, up 5.4 percent from 2005; total value of closings was \$16,399,935,918, up 17.7 percent from 2005. The inventory of unsold home at year-end rose to 43,438, up 9.8 from 2005, due most likely to the collapse of the sub-lending market.

### *Banking and Finance*

Fourteen of the nation's 20 largest publicly traded banks, including the six largest, operate full-service branches or offer some other financial services here. According to County Business Patterns, Harris County in 2005 had 8,106 financial establishments with a total annual payroll of \$5.873 billion and 93,487 employees.

### *Technology and Research*

NASA, the Texas Medical Center, major universities, and the largest energy and petrochemical companies make Houston/Harris County a focal point of U.S. research and development activities. Among its leaders in research entities include:

- Texas Center for Superconductivity and Advanced Materials,
- Texas Learning and Computation Center,
- Institute for Molecular Design,
- Materials Research Science and Engineering Center, and
- Texas Institute for Measurement and Evaluation Statistics.

Houston/Harris County is the forefront of energy exploration and production technology. ChevronTexaco, ExxonMobil, Shell, Baker Hughes and Weatherford International are among energy firms with major Research and Development laboratories here. Houston/Harris County is home to two Rice University professors that share the Nobel Prize for discovering fullerenes, the harbingers of nanotechnology. Rice University is also home of the Center for Biological and Environmental Nanotechnology and the Richard E. Smalley Institute for Nanoscale Science and Technology. Houston academic/research institutions founded nonprofit BioHouston, Inc. in 2001 to stimulate technology transfer and research commercialization, making Houston a key competitor in life science commercialization. Members include more than 175 institutions, companies,

and government units with more than 100,000 employees and total annual life science-related budgets in excess of \$6 billion.

#### *Aerospace*

Johnson Space Center (JSC), a \$1.5-billion complex began in 1961, occupies 1,620 acres with a total 2006 payroll expenditures that exceeded \$353 million. JSC employed 3,200 federal civil service personnel (2006) and more than 13,000 contractors personnel work in the vicinity. The JSC is responsible for:

- Management, design, development and assembly of the International Space Station.
- Management of the Space Shuttle program.
- Serves as NASA's lead center for life sciences research and applications.
- Selection and training of astronauts.
- Controls human space flights.
- Has many medical, scientific and engineering experiments conducted aboard the Space Shuttle and the International Space Station.

#### *Environmental Issues*

The U.S. Environmental Protection Agency (EPA), under the Clean Air Act, has established National Ambient Air Quality Standards for six criterion air pollutants: particulate matter, carbon monoxide, sulfur dioxide, nitrogen dioxide, lead and ground level ozone. The Houston/Harris County exceeds only the ozone standard and is working to attain it by 2010.

### **Economic Forecast**

Job growth in the Houston/Harris County is expected to be moderate in 2007, with an estimated gain of 65,000 jobs in the region. This is down from 2006's 72,000 jobs growth. Forecasts show that the national economy is slowing. While slower national economic growth imposes constraints on Houston, two other exogenous factors should continue to work as stimulants to the local economy. Further weakening of the dollar (Wachovia Economics Group expects a bit more than 5 percent slippage in '07) is a plus for Houston's exports of goods and services, and continued relatively high energy prices benefit Houston's upstream energy sectors.

Table 5-28: Average Annual Growth, Harris County/Gulf Coast Region and Texas Compared

Average Annual Growth (projected for 1995-2000)	Harris County/ Gulf Coast Region	Texas
Total Personal Income	6.5%	6.7%
Total Non-Farm Employment	1.9%	2.2%
Mining	1.0%	-0.2%
Construction	2.1%	2.7%
Manufacturing	1.7%	2.2%
Transportation, Communications and Public Utilities	1.3%	2.4%
Trade	1.9%	2.0%
Finance, Insurance and Real Estate	0.8%	0.7%
Services	2.7%	3.0%
Government	1.5%	1.7%
Retail Sales	7.4%	6.3%
Population	1.2%	1.2%
Per Capita Personal Income	5.2%	5.4%

Source: Texas Regional Outlook, John Sharp, Texas Comptroller of Public Accounts

While energy remains dominant, Houston/Harris County has diversified away from the concentration in upstream energy that led inevitably to the recession of the 1980s. The region had to reinvent itself. The energy jobs lost were never regained but were replaced by entirely new jobs in different sectors. Today, less than half of area's economic base employment is tied to energy.

Real estate markets are, for the most part, pretty much in balance. The speculative excesses in the 1980s are obviously absent today, thanks in part to the tax reforms of 1986, and construction is keeping pace with demand growth.

Houston/Harris County is more integrated into the world economy than any other major metropolitan area in Texas. Its population reflects this fact:

- Data from U.S. Census 2000 show that nearly one in five Houstonians is foreign-born.
- The Port of Houston leads the nation in foreign tonnage.
- George Bush Intercontinental Airport handles more than 5 million international passengers per year.
- Houston trails only New York City and Los Angeles in the number of consulates.
- More than half of all Texas firms with offices abroad are in Houston, and more than half of all foreign firms active in Texas are in Houston/Harris County.

The primary downside risks for Houston/Harris County economy can be phrased as challenges pertaining to improving air quality and ensuring a workforce with the knowledge needed to meet the demands of 21<sup>st</sup> century employers. In order to meet and exceed these challenges the following needs must be addressed:

- The need for micro-enterprise and small business initiatives to allow for the growth of secondary and tertiary business development.
- The need for more employer-university based cooperative training programs.

To this end, Harris County with the assistance of Angelou Economics, developed the Harris County Strategic Plan for economic development. The plan is an action-oriented plan designed to build the county's economy and strengthen its ability to attract the types of businesses and workers that will secure its position as a globally competitive business location. The plan will be presented to Commissioners Court for approval in November 2007.

## **Education**

Harris County boasts some of the finest places of learning in the United States. From early learning institutions to college graduate programs, Harris County residents have access to a multitude of educational opportunities (see Demographics-Education data in Section 3 pages 28-32). Within Harris County are approximately eighteen independent school districts that serve area residents. Also found within the County are Charter schools, technical schools, and a host of colleges and universities. Included in them are such well-known institutions as Rice University, Texas Southern University, University of Houston, Houston Baptist University, St. Thomas University, South Texas College of Law, North Harris Montgomery Community College, Lee College, San Jacinto College, and Houston Community College. Many Harris County residents have utilized education as the gateway of opportunity to lucrative careers, economic prosperity, and familial stability.

Unfortunately, some Harris County residents do fall between the cracks of the educational system. Secondary school dropout rates provided by the Texas Education Agency in the 2005-2006 school year, found that 10,191 students dropped out of secondary school (7<sup>th</sup> -12<sup>th</sup> grade) or 3.1 percent of all Harris County secondary students.

These figures may be correlated with the number of economically disadvantaged students in Harris County. The Texas Education Agency found that in the 2005-2006 school year 49.60 percent of all Harris County students are eligible for free meals. Another 9.03 percent of all students are eligible for reduced meals, and 1.40 percent are designated as "other economically disadvantaged". Total Harris County student enrollment was 755,290.

The Texas Education Agency indicates the attendance rate of Region 4 schools (2003-2004), which Harris County is a part, is 95.8 percent. The attendance rate amongst various ethnic groups was approximately the same, ranging from 95.2 percent for blacks, to a high of 95.9 percent for whites. Hispanics constitute the largest ethnic group in the regions schools (41.6%), followed by Whites (31.4%), African-American's (21.3%), Asian/pacific Islander's (5.5%), and Native American's (0.2%).

Student enrollment by programs (2003-2004) for the region shows that 17 percent of the students were in bilingual/ESL education programs, 7.4 percent were in gifted and talented programs, and 10.1 percent were in special education programs. In the TAKS Exit level, the class of 2005 had a cumulative pass rate of 91 percent.

Harris County area schools also boast a well-qualified and diverse group of teachers. In 2005, the average years of experience of teachers in the region were 11 years. The majority of the teachers in Harris County regional schools have at least a Bachelor's degree (74.9%), while 23.0 percent also have a Master's degree. The average class size of area schools ranged from 19.9 in kindergarten, to 24.1 in mixed grades, and averaged 23 in secondary school classes.

The aforementioned figures support the 2000 statistics regarding educated persons in Harris County. Of the 2,818,199 persons living in Harris County during the 2000 census, 1,283,847 were high school graduates ages 25 and over, and 435,772 were college graduates ages 25 and over. Nevertheless, the Houston-Galveston Area Council's 1998 report entitled "Goals for Tomorrow: A Comprehensive Planning Framework for the Houston-Galveston Area Council," indicates that although the percentage of residents age 25 and over without a high school diploma is slightly below the state average, it is still slightly above the national average.

The numbers changed little from 2000 to 2006. For persons 25 years and older in Harris County in 2006, 24 percent of persons did not have a high school diploma. This is down slightly from 2000, where 25.4 percent of the population aged 25 years and older did not achieve a high school diploma. There was a 3 percent increase over the six years in the number of 25+ persons obtaining a high school diploma (see Section 3 Demographics pages 28-32 for more data on Education).

Harris County supports the Houston-Galveston Area Council (HGAC) plan for the region. The plan notes that there are major challenges in regard to education in the region. It finds that the region's long-term competitiveness will be impacted by the effectiveness of the education system and its ability to serve a growing and increasingly diverse population. It also found that perceived quality of the school districts is a major determinant in many people's choice of where to live within the region. Regarding opportunities, the plan found that the region's K-12 education system compares favorably to other major metro areas; academic performance and financial management continue to improve. It also found that the region's community college systems are continuing to expand and improve. Finally, it noted that the region has a number of universities, which produce highly skilled graduates and have extensive research capabilities.

Harris County supports and hereby incorporates into its Consolidated Plan the goals for the region regarding education from the plan. Those goals include:

- Successful early childhood programs, stressing high levels of parental involvement, and ensuring that children begin school ready to learn.



- The region's K-12 education system is equipping students to excel academically, as indicated by specific performance measures.
- Independent School Districts coordinate with one another, as well as with local governments, in their long range planning.
- Expanded partnerships between schools, local governments, private businesses and civic groups.
- Coordination between the region's institutions of higher learning with local governments and the private sector.
- Employment training and continuing education programs that are accessible to all the region's residents.
- Coordination between the region's public agencies, educational institutions, non-profit organizations, and other educational service providers to expand and enhance adult literacy and English as a Second Language programs.

## **Workforce Development**

The Texas seasonally adjusted unemployment rate fell to 4.2 percent in August 2007, down from last month's 4.4 percent, and down significantly from 4.9 percent a year ago. Seasonally adjusted nonagricultural employment in Texas grew by 10,400 jobs, remaining strong, despite the U.S. economy's loss of 4,000 jobs this month. Texas employers have added 229,000 jobs in the past year. "Our strong Texas economy continues to surpass national trends, with employers adding jobs statewide again this month," said Texas Workforce Commission (TWC) Chair Diane Rath. "At 4.2 percent, the Texas unemployment rate continues to hover at 30-year recode lows and remains well below the national unemployment rate of 4.6 percent."

The Houston-Sugar Land-Baytown Metropolitan Statistical Area (MSA) gained 97,400 jobs in 2006, the best annual job growth since 1998, when 103,000 jobs were created. The annual increase for 2005 was revised downward by the Texas Workforce Commission to 58,800 jobs, from its original estimate of 60,400 published back in March 2006. The year 2006 started out in January with an over-the-year job gain with 112,800 from October 2005, a 4.8 percent increase. Two months later, in December, the over-the-year growth was back down to 4.0 percent, with the addition of 95,900 jobs. The Houston-Sugar Land-Baytown MSA annual growth rate improved from 2.6 percent in 2005 to 4.1 percent in 2006, higher than the Texas and the national job growth for 2006, which were 3.2 percent and 1.8 percent respectively.

The Harris County workforce is relatively young, with 36.45% of the population aged 25 to 44. According to estimates from the Texas Workforce Commission, and Labor Market Information Department, the region's civilian labor force has expanded since 1992 at an average annual rate of 1.6%. The civilian labor force in 2006 was estimated at 2.8 million people. Growth in the labor force is attributed to population increases in the region. Harris County experienced the largest growth of any other county. In 2001, unemployment in the Gulf Coast region averaged 4.5 percent.

According to the Texas Workforce Commission, the average unemployment rate in Harris County was 4.1% in August 2007. During the period 1991 through 1993 the annual average unemployment rate rose to 7.4 percent for 1993, then began decreasing to 4.4 percent in 1998. A minor slowdown to a rate of 4.7 percent occurred in 1999. The rate dipped to 4.3 percent in 2000, and this has slowly decreased by 2006. The 4.1% unemployment rate is considerably lower than the national average of 4.7% according to the United States Department of Labor Bureau of Labor Statistics in September 2007.

The Harris County unemployment rate is 4.1% in August 2007, or 227,137 people in 2007. The labor force participation rate in the region was 69.1 percent for the total population 16 years of age and older, while females 16+ had a participation rate of 42.9 percent. Over 76 percent of workers commuted by driving alone while only 3.4 percent used public transportation. A partial list of industries projected for significant growth by the Texas Workforce Commission's LMI Department includes services, agriculture, and construction. Some of the occupational groups slated for larger net growth in the region

include Real Estate, Rental Leasing Services, Technical Services, Retail Jobs, Food Services, Arts, Entertainment and Recreation Workers, Health Care and Social Assistance Industries, and Manufacturing Industries.

The regions industry projections are outlined in a report by The Work Source Labor Information Department report entitled “Gulf Coast Area: Industry Projections 2000-2010”. The regions employment is projected to increase from 2,583,550 to 3,176,650 over the 2004-2014 period. The region is expected to slightly outpace the projected state annual average of 2.1%, increasing by an average of 59,310 jobs per year for the projection period. It is anticipated that the 2004-2014 historical trend most of the employment growth will be generated by the Accommodation and Food Services, Arts, Entertainment and Recreation fields, Health Care and Social Assistance Industry, Education Services, Management of Companies and Enterprises, and Professional, Scientific and Technical Services.

The services industries are expected to account for more than half of all new jobs from 2000-2010. Business Services, Health Services, and Educational Services will account for over 66% of this growth. Within Business Services, Personnel Supply Services is projected to add the greatest number of jobs, 32,440, a growth rate of 48%. Staffing services are expected to be responsible for the majority of the industry’s growth, as companies reduce costs by contracting out employment needs.

Medical Services and Health Insurance and Computer & Data Processing Services are projected to experience some of the largest growth among all industries, with growth rates of over 41% and over 39% respectively. Medical Services is projected to grow by 99,850 jobs as more of the population turns to health maintenance organizations for health insurance to keep health care costs down from 2004-2014

Harris County continues to be highly affiliated with the oil and gas industry. The area is industrialized with products such as petrochemicals, petroleum refineries, fabricated metal product, food, paper, printing, publishing, and computers. Major employers in Harris County include Hewlett-Packard, ExxonMobil, Shell Oil, Continental Airlines, Kellogg Brown & Root, Chevron-Phillips, BP Amoco, and various employers within the internationally acclaimed medical center. Harris County also has many trade centers, such as large shopping malls, and strip shopping centers.

Table 5.29 Houston-Sugar Land-Baytown Top 10 Public Employers

Employer	Sector	Employees
Wal-Mart Stores	Retail	29,554
Houston ISD	Education	28,000
City of Houston	Government	23,000
Administaff	Professional Employer Services	19,851
Continental Airlines	Airline	19,661
Exxon Mobil Corp.	Oil and Gas	16,732
Memorial Hermann Healthcare System	Health care	16,248
University of Texas M.D. Anderson	Health care	15,293

Cancer Center		
Kroger Co.	Grocery	12,803
Halliburton	Oil and Gas	11,868

*Source: Houston-Sugar Land-Baytown Real Estate Market Overview 2007 Employment*

Steve Murdoch from the Texas Data Center identifies several challenges and opportunities regarding workforce development for the region. The challenges include developing a highly skilled workforce for the area, providing sufficient labor market information for employers and residents, assisting the working poor and welfare recipients to gain adequate skills to compete successfully in the work force, and integrating child care and transportation into the workforce development system.

In meeting those challenges, Harris County supports and incorporates into its Consolidated Plan the following implementation tools regarding workforce development:

- Promoting employment service programs.
- Promoting adult education and literacy program.
- Promoting job-training programs.
- Promoting welfare-to-work programs, and
- Integrating childcare and public transportation program coordination with job training.

## **Economic Development Programs**

Harris County is facing the reality that employers are more mobile than ever before. As the business climate changes both in the United States and throughout the world, CSD is working to ensure that Harris County residents can achieve a good quality of life.

- **Business Climate and Entrepreneurship**  
Harris County promotes business friendly regulations, supports research and development by strengthening ties between researchers and the private sector. Harris County encourages a globally competitive community by supporting entrepreneurial and small business development through incubators, access to capital, and incentives, and promotes integrated clusters of “knowledge-based” industries that capitalize on the region’s assets.
- **Workforce and Education**  
Harris County attracts a diverse workforce for the region’s industry cluster, and retains young professional workers that will form the foundation of future economic and population growth. Harris County will develop an educational system that prepares students to become the workforce for the future, and has strong linkages to the region’s public schools, community colleges, and universities.
- **Sites and Infrastructure**  
Harris County maintains and upgrades transportation infrastructure, and ensures adequate utility capacity for future economic development along with strong

telecommunications infrastructure. Harris County also proactively markets supply of “ready to build” sites, and promotes use of transit and pedestrian/bike options.

- **Quality of Life**  
Harris County ensures an attainable cost of living for residents and its workforce, and has adequate and diverse housing options. Retail, recreational and natural assets are provided and promoted throughout the County. Harris County promotes a strong sense of community pride; while providing an abundance of arts and cultural opportunities for its residents.
- **Economic Development and Marketing**  
Harris County is led by a strong, regionally focused economic development authority that develops effective tools to retain existing companies, and encourages economic development from within the community. This builds collaborative support for sustainable economic growth and develops a strong brand image that differentiates this region from its competitors.

#### Micro-businesses

Micro-businesses are a significant source of economic activity, but prospective owners often lack the financial and technical resources to start, maintain, or expand their businesses. Microenterprise assistance offers a helping hand to persons whose dreams of owning his or her own business might not otherwise be possible. Harris County does not offer this service, but supports those who do.

Microenterprise programs in the United State vary dramatically in terms of goals, intensities, institutional settings, economic contexts, and expected outcomes. However, in what is now more than a decade of practice in this county, some core program elements have emerged, virtually every program include the following components:

- ***Marketing and Recruitment:***  
Programs use a range of strategies to reach out to prospective clients and inform them about the services they offer. These typically involve some sort of orientation session. The goal of these efforts is not only to recruit clients, but to provide potential clients with information that allows them to assess their own readiness for the program.
- ***Training and /or Technical Assistance***  
Microenterprise programs provide their clients with some combination of training and technical assistance, primarily in order to build the skills they need to start or operate a business. Some programs may also include personal effectiveness components aimed at critical life management skills.
- ***Access to Capital***  
Virtually every microenterprise program recognizes that entrepreneurs need to access capital for their businesses. Most programs have internal loan funds, which may use

either a peer (group) or individuals lending model. Other program partners with outside financing sources, sometimes extending loan guarantees.

- ***Post –Loan and Post -Training services***

Although this programs component are not universal, many programs now are seeking to provide additional business assistance services after the completion or core training or the extension of a loan. In many cases, these take a sectoral or market focus, providing the business owner with specialized information needed to grow their business.

### Small Businesses

Additionally, small businesses, a major source of job creation, often lack the technical and financial resources to maintain or expand their businesses in light of changes in the economy. It is for this reason that technical and financial assistance to for-profit businesses is so important.

In terms of direct services, CSD’s role is limited to providing the basic governmental services. These services constitute part of the “infrastructure” that makes economic development possible. In addition to its direct service role, CSD will also work to provide such services as economic development coordination, marketing, business recruitment, and business retention through its non-grant economic development group. OHED uses a variety of methods to promote economic development. Many include all levels of government. The coordination of aid from various sources is one of the pillars of economic development programs. By working together with various levels of government, OHED can accomplish the economic development goals.

### Training and Education

The National Adult Literacy Survey (NALS) defines an illiterate individual as an under-employed or unemployed adult with six to nine years of school who is unprepared for the current workforce demands and lacks basic skills. NALS confirms that compared to persons with low literacy, literate persons are more likely to have a job, to keep that job longer, and to make a higher wage. Given the high dropout rate and the large number of people in Harris County that have difficulty speaking English, the number of illiterate persons is very likely significantly high.

Educational attainment continues to be the primary indicator of income in Harris County. For this reason, equitable opportunities for quality education are of utmost importance to the process of workforce and economic development in the county. Because trends show a pattern of poor school performance for children of poverty, projects that promote opportunities for low and moderate-income children to learn through after school programs and youth employment programs are needed, in order to supplement education provided by elementary and secondary schools. In addition, increased opportunities for adult education and job training are needed for adults who lack the background or skills to compete in the job market.

## Goal and Measurable Objectives

**ECONOMIC DEVELOPMENT GOAL:** To encourage economic revitalization efforts, stimulate economic opportunities in low and moderate income communities throughout the Harris County service area and create jobs for low- and moderate-income persons, by providing assistance to for-profit businesses, encouraging microenterprise development and providing technical assistance to existing and new businesses.

### **Objective 1: Direct Financial Assistance to For-Profits**

To provide direct financial assistance to for-profit businesses by February 28, 2012, for the purpose of creating/retaining 25 jobs with at least 51% reserved for low and moderate income persons thus expanding economic opportunity and improving the quality of life for unemployed and underemployed individuals.

### **Objective 2: Microenterprise Assistance**

To provide financial and technical assistance and training to enable 25 low and moderate-income persons the opportunity for entrepreneurship by February 28, 2012. Training and assistance to include but not limited to business counseling and micro-loan availability.

## Economic Development Programs

The Harris County is facing the reality that employers are more mobile than ever before. As the business climate changes both in the United States and throughout the world, Harris County is working to ensure that county residents can achieve a good quality of life.

### Micro-businesses

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- *Access to Capital*  
Virtually every microenterprise program recognizes that entrepreneurs need to access capital for their businesses. Most programs have internal loan funds, which may use either a peer (group) or individuals lending model. Other program partners with outside financing sources, sometimes extending loan guarantees.
- *Post –Loan and Post -Training services*  
Although these program components are not universal, many programs now are seeking to provide additional business assistance services after the completion or core training or the extension of a loan. In many cases, these take a sectoral or market focus, providing the business owner with specialized information needed to grow their business.



## **Small Businesses**

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## **Goal and Measurable Objectives**

<p><b>ECONOMIC DEVELOPMENT GOAL:</b> To encourage economic revitalization and workforce development efforts, stimulate economic opportunities in low- and moderate-income communities throughout the Harris County service area and create jobs for low- and moderate-income persons, by providing assistance to for-profit businesses, encouraging micro-enterprise development and providing technical assistance to existing and new businesses.</p>
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**Objective 1: Direct Financial Assistance to For-Profits (18A)**

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**Objective 2: Micro-enterprise Assistance (18B)**

To provide financial and technical assistance and training to enable 25 low- income persons the opportunity for entrepreneurship by February 28, 2012. Training and assistance to include but not limited to business counseling and micro-loan availability.

## Other Non-Housing Community Development Elements

The Other Non-Housing Community Development elements address needs that are not identified in the other areas in the Consolidated Plan. For the Harris County Consolidated Plan these areas include clearance and demolition, non-profit capacity building and planning.

### Clearance and Demolition

Harris County has addressed the need for nuisance abatement since 1989 through the Harris County Public Health and Environmental Services (HCPHES) Department. Largely in response to the public outcry of civic associations and other interested parties, the HCPHES began its program in effort to reduce the hazards of dilapidated, unsound structures and improve neighborhood integrity. The effort of nuisance abatement through clearance and demolition activities is an ongoing effort as structures continue to fall into disrepair and into a state of dilapidation.

According to the 2000 U.S. Census, there were approximately 185,000 housing structures built before 1978 in the Harris County service area. A substantial percentage of these units are concentrated in the low-income target areas. Many of these have been evaluated by the Harris County Appraisal District as being substandard and in need of razing.

Many structures within Harris County are in poor condition or are uninhabitable. These structures are safety and fire hazards to neighborhoods. Demolition and clearance of these types of structures is necessary to maintain a safe and sanitary community environment.

Vacant units suffer from a much higher rate of deterioration than occupied units as a result of a general lack of maintenance and vandalism. As a result, neighborhood quality of life is reduced. In addition, approximately three percent of the Harris County service area housing stock is dilapidated and requires removal.

### Non-Profit Capacity Building

According to the CDC Association of Greater Houston, there are approximately 120 community development corporations (CDC) in the greater Houston area. In addition to

#### Overview

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- According to the CDC Association of Greater Houston, there are approximately 120 community development corporations (CDC) in the greater Houston area.
- Improving the quality of life in extremely low- and low-income communities is vital to the success of service area stakeholders. Due to the projected growth of the service area, the lack of direction for growth management, and the need for coordinated efforts among public and private sectors, community planning is essential to sustain and improve these communities.

CDCs, in 2002, Harris County has certified 1 organization as Community Based Development Organizations (CBDO) and 6 as Community Housing Development Organizations (CHDO). Development and capacity of CDCs, CBDOs and CHDOs are the key to the implementation of community and housing revitalization efforts.

Several problems exist in the community development delivery system in Harris County. The service area lacks much-needed nonprofit development organizations and community development groups. Such groups are crucial to determining area needs, acting as subrecipients and garnering support and feedback from the community. In addition, a shortage of funds in both the public and private sectors reduces the effectiveness of community development activities. Harris County staff will develop training guides and workshops to assist organization to build capacity, develop programs, and make change in their communities.

#### *Housing Resource Center*

The Harris County Housing Resource Center (HRC), provides a vast array of housing and related information primarily targeted to families and individuals that are experiencing housing crises or are in need of affordable housing. HRC's mission is to aide the community in finding decent, safe, and affordable housing in a manner that promotes equal opportunity and fair housing. Services that the HRC provides include Affordable Housing Assistance; Homeownership Assistance; Emergency Assistance; and Support Services.

#### *Three Track Training Program*

Non-profit Education – The Three Track Program was developed to assist communities who have participated in the Harris County Community Planning program. The Program is designed to equip non-profits with startup resources and necessary tools to help them develop a vision, operate effectively and efficiently, and to establish planned projects that promote a mission. The components of the program will include Education, Capacity Building, and Communication. Training will consist of starting up new non-profit organizations in the community, assisting current non-profits, and planning and prioritization of community projects. The program offers support and a variety of resources. To be eligible for the program, organizations must be located in a HCCSD Community Plan Target Area.

## **Planning**

Unlike counties in other states such as California, Texas counties are not given the authority by the Texas Legislature to implement stringent land use regulations. The Planning and Development Section of the Harris County Community and Economic Development works in cooperation with other state, regional, and local planning entities such as the Texas Department of Transportation (TxDOT), the Texas Commission on Environmental Quality (TCEQ), the Houston-Galveston Area Council (H-GAC), and neighborhood organizations to implement plans for underprivileged areas of the county. The planning services that are provided by Harris County, particularly the Community

and Economic Development Department (CSD), include neighborhood level planning and comprehensive plan development for low-income communities.

Improving the quality of life in extremely low-, very low- and low-income communities is vital to the success of service area stakeholders. Due to the projected growth of the service area, the lack of direction for growth management, and the need for coordinated efforts among public and private sectors, community planning is essential to sustain and improve these communities. Harris County CSD planning staff will seek to assist one community per year to inventory, plan, and implement their neighborhood. Staff will also be reviewing past plans for improvements and seek the Neighborhood Revitalization Strategies (NRS) designation from HUD.

## **Goal and Measurable Objectives**

**OTHER INITIATIVES GOAL:** To develop an expanded and enhanced delivery system by building capacity of non-profit organizations, developing a planning process to be utilized to comprehensively address the needs within the extremely low-, very low- and low-income areas, assisting in creation of additional community development organizations, constructing of a network of service providers to coordinate resources or other means by which community development and revitalization is bolstered.

### **Objective 1: Clearance and Demolition (04)**

To eliminate 100 dilapidated and/or unsafe structures located in low and moderate-income areas in an effort to improve integrity of Harris County neighborhoods by February 28, 2012.

### **Objective 2: Nonprofit Capacity Building and Technical Assistance (19C)**

To provide assistance to 10 non-profit organizations, including assistance to Community Housing Development Organizations (CHDOs) and Community Based Development Organizations (CBDOs), to build capacity to support revitalization activities in low-income communities. Assistance includes, but is not limited to, technical assistance, referral services, and providing research and information services.

### **Objective 3: Planning (20)**

To support, encourage and facilitate countywide service planning and local community planning activities through the Harris County service area for the purpose of preparing for the future and ensuring stabilization and needed expansion of services and facilities through February 28, 2012. Local planning activities will provide neighborhood level plans to 4 low-income target areas by developing and conducting a planning process, supporting research and analyses, and providing technical assistance. Two plans are to be submitted to the U.S Department of Housing and Urban Development as Neighborhood Revitalization Strategies (NRS) by February 28, 2012.

## **Anti-Poverty Strategy**

According to the 2006 American Community Survey (ACS), 17 percent of Harris County residents' income was below the poverty level. The largest household group below poverty level was married-couples at 42 percent. However, the most severely impacted population was that of female householder families with no husband, 30 percent of households were below the poverty level. Of those female householders, 66 percent had related children under the age of 18. This population must overcome significant barriers, such as the need for affordable housing, childcare, and increased employment opportunities, to reach a greater socio-economic status.

### **Section 8 Rental Assistance Program**

The Section 8 Rental Assistance Program provides rent subsidies for low-income individuals and families and for persons who are elderly or disabled, and maintains their rent at affordable levels. The program, which is administered through the Harris County Housing Authority, offers participants the freedom of choice in finding units suitable to their needs and desires. The Section 8 Rental Assistance Program does not target units according to price or household type, but allows the renter to decide on what unit he or she thinks is most suitable. The selection of available units is subject to landlords' discretion.

Participants may lease privately owned apartment units, single-family homes, duplexes, trailer homes, townhouses, and cooperatives. The unit must comply with Housing Quality Standards (HQS) required by the Section 8 Rental Assistance Program. At the time a family initially receives tenant-based assistance for occupancy of a dwelling unit, the family share may not exceed 40 percent of the family's monthly-adjusted income. The tenant and owner must enter a lease for the unit.

The Harris County Section 8 Rental Assistance Program is currently serving more than 4,000 persons per month with rental assistance, operates with 1,800 vouchers and assists clients with almost 13 million in rental assistance annually. In order to expand the number of rental assistance vouchers available to Harris County residents, the Section 8 Rental Assistance Program has adopted a service improvement plan, the goal of which is to improve the program's lease-up rate and thus make itself eligible to apply for additional vouchers. Currently there is no waiting list for the Section 8 waiting list, and it will open in the near future.

The Section 8 program's strategy for meeting the housing needs of more individuals and families consists primarily of increasing the program's lease up rate, which would then allow for an additional number of vouchers to be obtained from HUD. In order to accomplish this goal, the PHA 5-year and Annual Plans outline program service improvements, and established objectives that will increase the efficiency and leasing rates of the program, thereby increasing the amount of available rental assistance vouchers.

## **Independence – Homeownership Program**

In 2005 HCHA developed a Housing Choice Voucher Homeownership Program. This program called “Independence.” It is designed to expand homeownership opportunities for HCHA Housing Choice Voucher (HCV) participants.

Since 1974, HUD’s Section 8 Rental Assistance Program has assisted low-income families obtain affordable rental housing. Approximately 2 million families receive Section 8 assistance at an annual cost of approximately \$13 billion. Congress passed legislation allowing Public Housing Authorities (PHAs) to use Section 8 rental certificates for homeownership and in the process help move Voucher recipients off of subsidies.

The Voucher Homeownership program creates a model to return Section 8 to its original intent of bridge housing. Additionally, it will immediately boost the limited number of available subsidized rental properties as the tenants move into their new homes. Longer term, it will free up vouchers as the mortgage subsidies are paid off. Harris County Housing Authority’s mission is to encourage clients to achieve self-sufficiency.

The Harris County HCV Homeownership Program will serve 15 cooperative cities and unincorporated areas of Harris County.

## **Disaster Housing Assistance Program (DHAP)**

DHAP is a program from the U.S. Department of Housing & Urban Development (HUD) that helps families who were in Hurricanes Katrina and Rita. The DHAP program will replace the existing FEMA rental-assistance program. The program runs from November 2007 through February 2009. Families currently receiving rental-housing assistance through FEMA are eligible for the DHAP program; there is nothing they need to do to qualify.

The biggest difference between the DHAP and the previous program will be that evacuees will get more than just rental assistance. Evacuees will receive the help of case managers, who will assist with job training and placement as well as securing health care and many other services. The idea is to provide evacuees with the necessary services to help get back a fully independent life.

## **Down payment Assistance Program (DAP)**

DAP provides financial assistance in the form of a deferred, forgivable loan to eligible first time homebuyers for down payment and closing costs assistance in the purchase of new and pre-owned homes (built within the last 10 years). Assistance up to \$14,400 is available to eligible homebuyers for the purchase of homes located in the unincorporated areas of Harris County, outside the cities of Houston, Baytown, and Pasadena, and within the 15 cooperating cities in Harris County. Assistance up to \$34,500 as available to

eligible homebuyers wishing to purchase new homes in HUD selected Harris County target areas.

## **Minor Home Repair Program**

The Harris County Home Repair Program provides grants to low-income and elderly households. It will give up to \$10,000 for minor home repairs or up to \$40,000 for Septic System and/or Water Well Repairs that have a current health and safety code violation citation(s).

## **Housing Resource Center**

The Housing Resource Center is the first stop for housing resources and assistance programs in Harris County. In partnership with other government agencies, as well as non-profit and community organizations, the Housing Resource Center has built a network concerned with finding and maintaining safe, comfortable, and secure housing for Harris County residents.

HRC provides a vast array of housing and related information primarily targeted to families and individuals that are experiencing housing crises or are in need of affordable housing. HRCs mission is to aide the community in finding decent, safe, and affordable housing in a manner that promotes equal opportunity and fair housing. Services that the HRC provides include Affordable Housing Assistance; Homeownership Assistance; Emergency Assistance; and Support Services.

## **Social Programs**

Harris County has a long standing history of supporting programs that enhance the quality of life for those individuals in poverty or on the brink of poverty. These programs vary in scope, size, location and target population. The following list are programs, who have and are being supported by Harris County CDBG, ESG, and HOME funds:

- East Harris County Youth Program
- Brentwood Wellness Access Demonstration Project
- Bay Area Women's Shelter
- Adelante Community Education Center
- Gulf Coast Community Services Rental Assistance Program
- Houston AIDS Foundation Rental Assistance Program
- Houston Area Women's Center
- Bridge over Troubled Waters
- Associated Catholic Charities Homeless Services and Shelter
- Coalition for the Homeless Houston/Harris County
- Neighborhood Centers, Inc.
- Harris County Public Health and Environmental Services



## Goals and Strategies

Many Harris County residents are currently living at or below the state poverty level. Many of these people are homeless or at risk of becoming homeless because of insufficient income. There is a great need among these individuals to expand their opportunities for education and employment, and thus improve their quality of living.

### Anti-Poverty Strategies

- To assist low-income persons and families in achieving income levels above the Texas State poverty line. This will be achieved by expanding the number of available jobs within the CSD service area. Through programs offered by local organizations.
- To expand programs and services offered by CSD, the Housing Authority, Public Health Department, Community Assistance and local organizations to persons in need. This may be done by increasing the number of affordable rental units, increasing the number of Section 8 vouchers, expanding public health initiatives to underserved areas, offering affordable childcare service, and developing job creation programs through micro-loans, small business loans, and community revitalization. Only through strong and coordinated collaboration will this strategy be a true success.
- To build and form partnerships with Community Development Corporations (CDC), Community Housing Development Organizations (CHDO), other non-profits, and other county departments, in planning revitalization strategies for local neighborhoods. Through community plans, neighborhoods can begin to implement strategies that can improve the local socio-economic environment.
- To provide training and technical assistance to individuals and non-profits via the Housing Resource Center, Medical Non-Emergency Transportation Website, and Three Tract Training Program. These programs provide information and referrals to community resources to help create change in lives and communities.

## **Intergovernmental Coordination and Partnerships**

### **Harris County Institutional Structure**

The Harris County Community Services Department (CSD) provides planning, development, monitoring, and financial services for Harris County's HUD entitlement funds. Each of CSD's three sections performs separate functions in the community development process. The coordination among sections requires the cooperation of and the communication among groups by working as a community development team. Harris County's institutional structure aims to ensure broad community input throughout the development and implementation of the Consolidated Plan, build public/private partnerships to implement the Plan and related projects, and monitor and evaluate the goals, strategies and program outcomes.

Furthermore, as Harris County is a jurisdiction that received an Emergency Solutions Grant (ESG) from HUD, CSD must consult with the Coalition for the Homeless of Houston/Harris County, the local Continuum of Care, in determining how to allocate its ESG grant for eligible activities by developing the performance standards for and evaluating the outcomes of projects and activities assisted by ESG funds and by developing funding, policies, and procedures for the operation and administration of the HMIS. Moving forward, these performance standards, which are currently being developed by CSD, and other partners from the Continuum of Care, will establish minimum requirements regarding standards for providing ESG assistance, will establish a centralized or coordinated assessment system, and will identify the process for making subawards and a description of how the jurisdiction intends to make its allocation available to private nonprofit organizations. The research and development of the performance standards will also address the plan for reaching out to and consulting with homeless or formerly homeless individuals in considering and making policies and decisions.

CSD has formed a partnership with the Harris County Public Infrastructure Department (PID). This partnership brings to CSD's project evaluation and monitoring a greater level of engineering expertise. From the onset, potential public facilities and infrastructure projects from CSD's Request for Proposals process are evaluated and then monitored by CSD and PID staff for proper planning/design and construction management.

For housing strategies, CSD – during the development of the Consolidated Plan – will consult with the local Public Housing Authority (PHA), non-profit housing providers, and for-profit housing developers, particularly those who serve low-income households in Harris County's service areas. The jurisdictions shall make an effort to provide information to the PHA about consolidated plan activities related to its developments and surrounding communities so that the PHA can make this information available at the annual public hearing required for the PHA Plan.

## Partnerships

### Harris County Public Health and Environmental Services

#### *Lead-Based Paint Abatement*

The foremost source of lead in the environments of young children is house paint applied prior to 1978, when lead-based paint was banned from consumer use. In an effort to provide a streamlined system to address this issue, Harris County CSD has partnered with the Harris County Public Health and Environmental Services Department (PHES) to provide testing and remediation services. Working with PHES, Harris County's Lead-Based Paint program identifies school children with high lead blood levels. Once they have been identified, a risk assessment is conducted to determine where the child is coming into contact with the lead hazard. When the source is identified, PHES staff works with the family to eliminate the hazard, including lead abatement and relocation (if necessary).

### Harris County Housing Authority

The Harris County Housing Authority is an independent agency, whose primary purpose is to provide housing assistance to low-income residents of Harris County through the Section 8 Housing Choice Voucher Program (HCVP), the Homeownership "Independence" Program, the Homeless Housing Program, and the Disaster Housing Assistance Program (DHAP). The Authority is a public non-profit. Commissioners Court confirms the appointment of five board members. The Authority will comply with federal, state, and local laws and regulations in regard to procurement procedures, financial management, and planning and building.

#### *Section 8 Housing Choice Voucher Program (HCVP)*

The Section 8 HCVP assists low-income families to secure decent, safe, and sanitary housing through voucher programs. Each family pays a portion (30 percent) of its income for rent. The program pays the remainder of the contract amount.

#### *Homeownership "Independence" Program*

According to the Houston Housing Authority, the program called "Independence" is designed to expand homeownership opportunities for HCHA Housing Choice Voucher (HCV) participants. The program is designed specifically to help those who have used their housing-voucher payments as a stepping-stone to financial stability.

#### *Affordable Housing Development Program*

According to the Harris County Housing Authority, the HCHA is aggressively building and operating innovative tax-credit housing developments by working with the region's best private-sector partners. These properties, many of which specialize in housing for senior citizens, are full service developments on par with even the nicest private sector properties.

#### *Homeless Housing Program*

According to the Harris County Housing Authority, the HCHA works with its non-profit partners to operate Jackson Hinds Gardens, a 110-unit single residency occupancy

community serving the Houston region's homeless population. It is the first homeless facility in Houston built on the "Housing First" model – a concept that says we should help the homeless find long-term residency solutions, and then treat the root causes of their homelessness.

#### *Disaster Housing Assistance Program (DHAP)*

The DHAP replaces the existing FEMA rental-subsidy program, which currently assists approximately 40,000 families affected by Hurricanes Katrina and Rita – more than 8,000 of which reside in Harris County. The DHAP is the result of an interagency agreement between HUD and FEMA, and it is designed to move families currently receiving rental-assistance toward self sufficiency

#### Harris County Library District

##### *Capital Improvements*

Harris County Community & Economic Development Department and the Library District have worked hand in hand for several years to improve educational opportunities in low income target areas by rehabilitating old libraries and building new facilities. Projects have included coordinating with local community colleges, such as Lone Star College and Lee College.

#### Healthcare Service Needs for the Homeless

CSD also facilitated and coordinated a Medical Focus Group to help identify medical services for the homeless population in Houston/Harris County. This focus group created strategies for the next ten years to address healthcare needs for homeless person, particularly the chronically homeless. The agencies that participated included:

- Harris County Mental Health Mental Retardation (MHMRA)
- Harris County Hospital District (HCHD)
- Harris County Public Health and Environmental Services (HCPHES)
- City of Houston Department of Health and Human Services (HDDHHS)
- Houston Veterans Administration Hospital
- Healthcare for the Homeless-Houston
- Coalition for the Homeless
- United Way of the Texas Gulf Coast
- Montrose Counseling Center
- Baylor College of Medicine
- Harris County Hospital District
- University of Texas

#### The Continuum of Care Collaborative and the Coalition for the Homeless of Houston/Harris County

In addressing its homeless problem, Harris County is proud to be a member of the Houston/Harris County Continuum of Care since 1992. The goal of the Collaborative not only reduces chronic homelessness, but also decreases episodic and transitional homelessness to the greatest extent possible. As of March 2006, the Collaborative had secured nearly \$100 million for Houston/Harris County to address the needs of homeless

individuals. The Coalition is a partner and the organizing agency for the Continuum of Care and Homeless Information Management System (HIMS). The Continuum of Care plan requires participation of a broad cross section of community representatives, data collection and analysis of homeless needs, and collaborative, consensus-based decision-making around local priorities. Through this system, Harris County is able to coordinate housing assistance and services for homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) and persons who were recently homeless but now live in permanent housing. As described by the Coalition for the Homeless, the basic components of the Continuum of Care are:

- A system of outreach, engagement, and assessment for determining the needs and conditions of individuals or families who are homeless and the necessary support to identify, prioritize, and respond to persons who are chronically homeless.
- Emergency shelters with appropriate supportive services to help ensure that homeless individuals and families receive adequate emergency shelter and referral to necessary service providers or housing search counselors.
- Rapid re-housing to help persons with lower barriers who are homeless successfully move to, and stay in, conventional housing units.
- Transitional housing with appropriate supportive services to help homeless individuals and families who need more assistance to prepare to make the transition to permanent housing and independent living.
- Permanent housing, or permanent supportive housing, to help meet the long-term needs of homeless individuals and families.
- Prevention strategies, which play an integral role in a community's plan to eliminate homelessness by effectively intervening for persons at risk of homelessness or those being discharged from public systems – e.g., corrections, foster care, mental health, and other institutions – so they do not enter the homeless system.

In order to fulfill these broad-reaching goals, Harris County must participate and coordinate an extensive network of public, private, non-profit, philanthropic, and faith-based partnerships (as described throughout this section).

#### Greater Houston Builders Association and numerous Homeownership Lending Organizations

##### *Providing Homeownership Opportunities*

Harris County operates a program that assists eligible homebuyers with Downpayment Assistance, called the Downpayment Assistance Program (DAP). DAP partners with the Greater Houston Builders Association and numerous Homeownership Lending Organizations to market and educate future homebuyers on the DAP program as well as responsibilities of homeowners.

#### Economic Development Organizations

##### *Economic Opportunities and Business Development*

Harris County supports the activities of several Economic Development Organizations, such as the Greater Houston Partnership, the Economic Alliance, and BayArea Houston

Association. These organization are involved in the marketing and recruitment of businesses to the county.

#### Housing Resource Center

The Housing Resource Center (HRC) is the first stop for housing resources and assistance programs in Harris County. In partnership with other government agencies, as well as non-profit and community organizations, the Housing Resource Center has built a network concerned with finding and maintaining safe, comfortable, and secure housing for Harris County residents.

HRC provides a vast array of housing and related information primarily targeted to families and individuals that are experiencing housing crises or are in need of affordable housing. HRCs mission is to aide the community in finding decent, safe, and affordable housing in a manner that promotes equal opportunity and fair housing. Services that the HRC provides include Affordable Housing Assistance; Homeownership Assistance; Emergency Assistance; and Support Services.

### **Strengths and Gaps**

The institutional structure through which homelessness and affordable housing issues are addressed in Harris County is stronger today than it has been in the past. There is a greater awareness by the private sector of the need for affordable housing, and there are more outreach efforts by both the County and the private sector to find better ways to coordinate efforts and resources to address the deficits in homelessness prevention and assessment and access to affordable housing.

Harris County's institutional structure strengths include an extensive network of strong, diverse community partnerships with public, private, non-profit, and faith-based organizations. These partnerships allow the County to participate and coordinate efforts that address specific affordable housing and homeless needs. As mentioned previously, CSD has already established partnerships with a number of public and private agencies. In order to bolster project evaluation, CSD has already partnered with the Coalition for the Homeless of Houston/Harris County, the local Continuum of Care, to participate in the project review process. Also, CSD has an on-going relationship with the Texas Department of Housing and Community Affairs (TDHCA) concerning the coordination of Low Income Housing Tax Credits (LIHTC).

Moving forward, CSD would like to build upon the existing partnerships with organizations such as TDHCA, as well as create new partnerships with public, private, non-profit, philanthropic, and non-profit organizations. With respect to specific gaps, CSD would like to continue trying to research and develop linking services between institutional discharge cases (persons being discharged from jail, mental institutions, military institutions, etc, and likely to be released into homelessness) and community essential services. CSD would like to improve the coordination between homeless supportive services and housing services. Also, CSD would like to continue improving the housing standards guidebook by consulting with developers and housing providers.

Due to the diversity of projects and community needs in the County, CSD would like to increase overall communication efforts amongst all partner organizations and focus on pinpointing specific coordination-related outcomes, such as assigning and diversifying project leads, identifying sources of additional funding, and establishing interrelated and synthesized goals.

In order to address these concerns, CSD will focus on increasing overall research, planning, coordination, and implementation efforts involving partner organizations. CSD will do the following:

- Increase dialogue with private sector and non-profit interests
- Continue community planning support in target cities and neighborhoods
- Continue technical assistance and capacity building support for non-profit housing developers and community groups
- Increase efforts to strengthen the partnerships between the County, participating cities, the State (and state agencies), and HUD.

Within each of these efforts, CSD will focus on, not just increasing one-on-one communication, but integrating information throughout the institutional coordination network.

## **Coordination**

The Consolidated Plan process is an example of the County's commitment to coordinate efforts involving the Continuum of Care, public and assisted housing providers, and private and governmental health, mental health, and service agencies. Coordination between the County and the private sector will continue to be pursued and enhanced where possible through increased formal dialogue between private financial institutions, developers, social service providers, and County staff.

In an effort to enhance its institutional structure, Harris County is a member of, and/or supports many local organizations in order to ensure necessary programs and services are available to those in need. Coordination of multiple departments, agencies, and services is a difficult task and one that the County is striving to improve. Along with an increased focus on citizen participation, the County is focusing on bolstering the system that serves those most in need, including the extremely low-, low-, moderate-, middle-income households; and the homeless, especially the chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth, and persons who were recently homeless but now live in permanent housing.

Through continued relationships with PID, PHA, and the Coalition for the Homeless of Houston/Harris County, as well as many other local and regional agencies and organizations, CSD will solidify and expand its housing assistance coordination efforts.

## **Monitoring Plan**

As grantee of the U.S. Department of Housing and Urban Development's (HUD) entitlement funds: Community Development Block Grant (CDBG), HOME Investment Partnerships (HOME), Emergency Solutions Grant Program (ESGP); and competitive funds, Shelter Plus Care (SPC) Program and Supportive Housing Program (SHP), Harris County is responsible for determining the adequacy of performance for subrecipient<sup>1</sup> agreements and for taking appropriate action when performance problems arise. The primary purpose of Harris County's monitoring program is to ensure that subrecipients of entitlement and competitive funds carry out their activities in accordance with the respective regulations and individual applications for funding and all relevant agreements, while also ensuring that funded projects and programs continue to follow the direction of the Consolidated Plan and any other relevant comprehensive plans. Harris County, through its Community & Economic Development Department (CSD), is responsible for managing the day-to-day operations of grant and subgrant support activities which includes subrecipient oversight and monitoring activities.

Specific areas of subrecipient operations that will be reviewed by CSD staff include financial performance, project timeliness, record-keeping procedures and compliance with federal regulations and applicable program guidelines. Staff members will continually assess subrecipient activity to determine organizational ability to carry out approved projects. Where potential problem areas are found, staff will assist subrecipients by providing technical assistance and training.

## **Program Objectives**

Program objectives and performance measures are established in each subrecipient agreement allocated funding in the Annual Action Plan and consistent with HUD's National Continuum of Care Homeless Assistance Competition. Harris County will strategically conduct monitoring reviews of program objectives and performance measures to ensure that they are carried out in a timely manner and in accordance with the county's five-year strategy. Furthermore, regular on-site and desk monitoring ensures that information submitted to Harris County, as related to program objectives, is correct and complete.

As a part of the Request for Proposal (RFP) process, subrecipients will submit a statement of work for each proposed activity. Following the approval of funding, this statement of work will be reviewed and incorporated into a written agreement between the county and the subrecipient. At minimum, the statement of work will provide:

- A description of the work to be accomplished;
- A schedule for completion of the work; and
- A line-item budget for the proposed activity

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<sup>1</sup> Subrecipients of competitive funds are referred to as project sponsors.



As a part of the National Continuum of Care Homeless Assistance Competition, project sponsors<sup>2</sup> submit an application for SPC or SHP funding. HUD selects Continuum applications for funding. Upon completion of required submissions to HUD (e.g. Technical Submissions for SHP projects and Grant Agreements), a written agreement between the county and the project sponsor is executed. The agreements detail the provision of rental assistance to homeless persons and/or disabled persons; the provision of supportive services to homeless and/or disabled persons; use of current Fair Market Rents; and tracking of Program Objectives to include obtaining and remaining in permanent housing, increased skills and income, and greater self-determination.

The agreements and statements of work will be written in sufficient detail to allow CSD staff to monitor performance.

## **Reporting and Tracking Systems**

All subrecipients of CDBG and ESG must submit written reports and forms to CSD on a scheduled basis. These reports and forms include but are not limited to the following:

- *Project Status Report:* This report tracks the number of units delivered per month and cumulatively. When not on target with the contract goal or amount of award expended for the percent of contract time elapsed in the program year, subrecipients must provide an explanation for the shortfall and a plan of action to get back on target
- *Client Data Report:* Submitted monthly, this report lists all new and duplicate clients served during the reporting month, as well as the number of units of service per client and other requested demographic information.
- *Tally Sheet:* Submitted monthly, this report provides a cumulative summary of the number of new persons served by the program during the program year..
- *Employee Data Report:* Submitted monthly, this report details employees working on the project.
- *Mid-Year Report:* Subrecipients submit a narrative summary of the project's activities, goals and evaluation of the effectiveness of the program through the first half of the program year.
- *Annual Performance Report:* Submitted annually, subrecipients submit a narrative summary of the program's activities, goals and evaluation of the effectiveness of the program for the entire program year.

Monthly and mid-year reports are to be submitted in accordance with subrecipient agreements. The annual performance report is due within one month after the end of the contract period. Staff conducts desk reviews of the information submitted on a monthly basis and notifies the subrecipient of any discrepancies. Staff also performs an annual evaluation to give guidance for future program direction.

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<sup>2</sup> Project Sponsors are subrecipients of competitive funds.

All sponsor agencies of SPC and SHP funds must submit written reports and forms to CSD on a scheduled basis. These reports and forms include but are not limited to the following:

- *Project Status Report:* This report summarizes the number of participants receiving rental assistance per month, includes a checklist of source documentation submitted for reimbursement, and an area for sponsor agency staff to sign, certifying that all participant data is current in the Homeless Management Information System as required by HUD.
- *Household Characteristics Summary (only for SPC):* Submitted monthly, this report provides the total number of housing units broken down by bedroom size and type of disability per participant.
- *Household Characteristics Summary (only for SPC):* Submitted monthly, this report provides information per participant on the amount of the lease, utility allowance, resident rent portion, and rental subsidy amount requested to be paid with SPC funds.
- *Employee Data Report:* Submitted monthly, this report details the employees working on the project.
- *Quarterly Persons Served Report:* Submitted quarterly, this report tracks all persons served in the program, to include entry date, previous living situation, income at entry, services provided, and other data required by HUD for the Annual Progress Report.
- *Annual Progress Report and Checklist:* Submitted annually, this report summarizes the number of persons served during the operating year, provides demographic information on persons entering the program, more specific information on persons exiting the program, amount of match as required by either SPC or SHP, and a brief narrative from the sponsor agency to provide explanations to items in the report if necessary. The sponsor agency must submit a checklist which aids in identifying if all items have been answered accurately prior to submission to CSD.

Monthly and quarterly reports are to be submitted in accordance with sponsor agency agreements. The annual progress report is due to CSD no later than 30 days after the end of the operating year; CSD then submits the report to HUD no later than 90 days after the end of the operating year. Staff conducts desk reviews of the information submitted on a monthly basis and notifies the agency of any discrepancies.

Subrecipients of Affordable Housing multifamily projects must submit written reports and forms to CSD on a scheduled basis. These reports and forms include but are not limited to the following:

- *Rental Housing Project Initial Lease-Up Compliance Report:* Submitted monthly until initial property lease-up is met.
- *Rental Housing Project Compliance Report:* Submitted quarterly after confirmation of lease-up.

## **Monitoring Schedule**

CSD currently monitors its subrecipient organizations on a scheduled basis. For construction-related projects, weekly updates are received from the Harris County Public Infrastructure Department and from the respective project and construction management representatives of the funded entities. These updates detail project costs, milestone accomplishment and significant events. Data from these updates will be used to determine subrecipient success in meeting program objectives as related to the Consolidated Plan.

For housing-related projects, Harris County conducts monitoring for down-payment assistance projects on a case-by-case basis. Eligibility file reviews and housing quality standards inspections are conducted prior to closing for each unit of assistance provided. For housing rehabilitation and repair activities, inspections of subrecipient work performance will be conducted on a scheduled basis prior to the reimbursement of grant funds to that subrecipient.

For all other projects, Harris County conducts monthly desk reviews and scheduled on-site monitoring visits as dictated by risk analysis or program regulations.

## **On-Site Monitoring**

Scheduled site visits are conducted by CSD staff to monitor program progress. The purpose of Harris County's on-site monitoring program is to determine if a subrecipient is carrying out its program activities as described in the RFP and the written agreement. On-site monitoring is also used to ensure that required records are maintained to demonstrate subrecipient compliance with applicable regulations.

The frequency of on-site monitoring is determined as a result of risk analysis conducted by CSD staff or program regulations. Through risk analysis, priorities are established and resources allocated. Subrecipients that represent the greatest vulnerability to fraud, waste and mismanagement are monitored within the resources available. Risk factors evaluated include:

- size of the subaward administered by a subrecipient;
- complexity of the subaward requirements;
- subrecipients who are new to the entitlement program;
- subrecipients with turnover in key staff positions;
- subrecipients with previous compliance or performance problems;
- subrecipients carrying out high-risk activities such as economic development or homeless prevention;
- new activities the subrecipient is undertaking,
- monitoring findings and/or concerns from past reviews
- other criteria, which may indicate at-risk subrecipients

Upon conclusion of on-site monitoring visits, subrecipient agencies are notified in writing of any findings and given a date by which all findings are to be addressed. Corrective actions that must be taken by subrecipients are specified. Concerns are also addressed in the monitoring letter to subrecipients. Recommendations for improvement are made.

Harris County CSD staff also conduct financial monitoring reviews. Agencies are required to certify that funds are being used in accordance with their contract with Harris County. Harris County will continue to use these guidelines for subrecipient monitoring activities and will incorporate any additional requirements as recommended by HUD as needed. Specific monitoring procedures are outlined in a separate document entitled “Harris County’s Subrecipient Monitoring Plan” and made available upon request.